

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Congressional Leadership Fund

ADDRESS (number and street)

1747 Pennsylvania Avenue, NW

5th Floor

Check if different
than previously
reported. (ACC)

Washington

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00504530

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☒ Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

NY

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Crosby, Caleb, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Congressional Leadership Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 25 / 2022 To: M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2022		61186662.56
(b) Cash on Hand at Beginning of Reporting Period.....	139469905.48	
(c) Total Receipts (from Line 19)	17851399.64	124221164.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	157321305.12	185407827.42
7. Total Disbursements (from Line 31).....	30011963.71	58098486.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	127309341.41	127309341.41
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Congressional Leadership Fund

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	5		2	0	2	2		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		1	2		2	0	2	2		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	10500.00
(ii) Unitemized	1.00	246.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1.00	10746.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5001.00	35746.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	506650.47
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	17846398.64	123678768.39
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17851399.64	124221164.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17851399.64	124221164.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1497.54	32791.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1497.54	32791.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	354892.00	659592.00
24. Independent Expenditures (use Schedule E)	27814296.78	42085976.97
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1841277.39	15320125.11
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30011963.71	58098486.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30011963.71	58098486.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5001.00	35746.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5001.00	35746.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1497.54	32791.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	1497.54	32791.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC PAC

Mailing Address 412 FIRST STREET SE
SUITE 300

City
WASHINGTON

State
DC

Zip Code
20003-1804

FEC ID number of contributing
federal political committee.

C

C00022343

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA11C.339337

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

5000.00

TOTAL This Period (last page this line number only)..... ▶

5000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLSON, JIM, , ,

Mailing Address 2143 ROYAL LYTHAM GLEN

City
ESCONDIDOState
CAZip Code
92026-1089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2022

Transaction ID : SA17.350430

Amount of Each Receipt this Period

- 15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2022

Transaction ID : SA17.325223

Amount of Each Receipt this Period

914.35

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ABE, JOSEPH, , ,

Mailing Address 582 NORTH LAUREL VALLEY DRIVE

City
AZUSAState
CAZip Code
91702-1846FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JOSEPH E ABE, A DENTAL CORPOccupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2022

Transaction ID : SA17.325264

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

- 14.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTIState
MIZip Code
48197-1738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325285

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDSState
MIZip Code
49515-0671FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325702

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDSState
MIZip Code
49515-0671FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325703

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AMYX, PATRICIA, , ,

Mailing Address 4382 NORTH ROSEPOINT AVENUE

City
MERIDIANState
IDZip Code
83646-3702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325509

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AMYX, PATRICIA, , ,

Mailing Address 4382 NORTH ROSEPOINT AVENUE

City
MERIDIANState
IDZip Code
83646-3702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.350398

Amount of Each Receipt this Period

- 0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325380

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325383

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325388

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325391

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

5.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNE

State
TX

Zip Code
76033-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325397

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNE

State
TX

Zip Code
76033-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325398

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLE

State
IL

Zip Code
60532-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325233

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

45.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLE

State
IL

Zip Code
60532-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325235

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLE

State
IL

Zip Code
60532-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325238

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRACKEN, KAY, , ,

Mailing Address 405 HAMVASSY LANE

City
TYLER

State
TX

Zip Code
75701-5324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRACKEN INTEREST

Occupation (for Individual)
OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2301.70

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325635

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.80

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARK, CHARLES, , ,

Mailing Address 3220 CUNEEN TRAIL EAST

City
INVER GROVE HEIGHTState
MNZip Code
55076-4540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLCLARKDDXOccupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325532

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DRUCE, LARRY, , ,

Mailing Address 4001 SOUTH MONTAIA DRIVE

City
WEST VALLEY CITYState
UTZip Code
84119-4822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325225

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ESSOE, RAMONA, , ,

Mailing Address N33W29231

City
PEWAUKEEState
WIZip Code
53072-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325586

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRITZLER, JAMES, , ,

Mailing Address 225 FRANCES LANE

City
SAN CARLOSState
CAZip Code
94070-4463FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325261

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City
LAKE PANASOFFKEEState
FLZip Code
33538-6044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325492

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMANN, KAREN, , ,

Mailing Address 4090 OAK PARK DRIVE

City
SUWANEEState
GAZip Code
30024-1842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

242.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325234

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMANN, KAREN, , ,

Mailing Address 4090 OAK PARK DRIVE

City
SUWANEE

State
GA

Zip Code
30024-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.75

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325236

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMANN, KAREN, , ,

Mailing Address 4090 OAK PARK DRIVE

City
SUWANEE

State
GA

Zip Code
30024-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.75

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325498

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONT

State
IL

Zip Code
61568-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325479

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARLFINGER, CHARLES, , ,

Mailing Address 7830 MANASOTA KEY ROAD

City
ENGLEWOOD

State
FL

Zip Code
34223-9359

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FBM

Occupation (for Individual)
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1442.85

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325597

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, KATHLEEN, , ,

Mailing Address 12900 CAMINO DEL VALLE

City
POWAY

State
CA

Zip Code
92064-1814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.35

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325643

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOOKER, LISA, , ,

Mailing Address P.O. BOX 190

City
BELLE GLADE

State
FL

Zip Code
33430-0190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LISA HOOKER, INC.

Occupation (for Individual)
CSR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.40

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325291

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325678

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325679

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325681

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325682

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325686

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325689

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325691

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325694

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325698

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

10.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KEINATH, WARREN C., , ,

Mailing Address 24 RAVENS POINTE DR.

City
LAKE SAINT LOUIS

State
MO

Zip Code
63367-2238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2268.50

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325622

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEINATH, WARREN C., , ,

Mailing Address 24 RAVENS POINTE DR.

City
LAKE SAINT LOUIS

State
MO

Zip Code
63367-2238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2268.50

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325623

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEINATH, WARREN C., , ,

Mailing Address 24 RAVENS POINTE DR.

City
LAKE SAINT LOUIS

State
MO

Zip Code
63367-2238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2268.50

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325625

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KINCL, LOUIS, , ,

Mailing Address 303 WINSOR COURT

City
BROOKELAND

State
TX

Zip Code
75931-5692

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1017.78

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325446

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAND, NANCY, , ,

Mailing Address 34 COPENHAGEN AVE

City
PUNTA GORDA

State
FL

Zip Code
33950-7316

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.45

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325448

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANIUS, BARBARA, , ,

Mailing Address 12662 HARRIET CIRCLE

City
DALLAS

State
TX

Zip Code
75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325459

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOPEZ, DAVID, , ,

Mailing Address 20845 WEST CARVER ROAD

City
BUCKEYE

State
AZ

Zip Code
85326-4198

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CANAM STEEL CORP

Occupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.75

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325312

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAY, JIM, , ,

Mailing Address 1009 WESLEY DOWNS ROAD

City
MONROE

State
NC

Zip Code
28110-8648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.45

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325644

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCSHEA, RITA, , ,

Mailing Address 18 COUNTRY BLUFF COURT

City
SAINT CHARLES

State
MO

Zip Code
63301-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

268.40

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325239

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCSHEA, RITA, , ,

Mailing Address 18 COUNTRY BLUFF COURT

City
SAINT CHARLES

State
MO

Zip Code
63301-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.40

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325241

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCSHEA, RITA, , ,

Mailing Address 18 COUNTRY BLUFF COURT

City
SAINT CHARLES

State
MO

Zip Code
63301-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.40

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325242

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCSHEA, RITA, , ,

Mailing Address 18 COUNTRY BLUFF COURT

City
SAINT CHARLES

State
MO

Zip Code
63301-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

268.40

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325243

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

32.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCSHEA, RITA, , ,

Mailing Address 18 COUNTRY BLUFF COURT

City
SAINT CHARLES

State
MO

Zip Code
63301-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325244

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325638

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325647

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325648

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325649

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325650

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325651

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325652

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PALERMO, MARK, , ,

Mailing Address 246 GARFIELD PLACD

City
BROOKLYNState
NYZip Code
11215-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

877.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325610

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PALERMO, MARK, , ,

Mailing Address 246 GARFIELD PLACD

City
BROOKLYN

State
NY

Zip Code
11215-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

877.00

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325612

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PARTRIDGE, LINDA, , ,

Mailing Address 120 OFALLON PLAZA

City
O FALLON

State
MO

Zip Code
63366-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARTRIDGE COUNSELING

Occupation (for Individual)
COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.67

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325237

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLSTEIN, CAROLE, , ,

Mailing Address 863 STRATHMORE DR.

City
ORLANDO

State
FL

Zip Code
32803-6941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

307.10

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325224

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, KENNETH, , ,

Mailing Address 9225 EAST TANQUE VERDE ROAD, APT 4

City
TUCSON

State
AZ

Zip Code
85749-7796

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.33

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325310

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPIEGL, PETER, , ,

Mailing Address W7106 PULS FARM PLACE

City
GREENVILLE

State
WI

Zip Code
54942-9501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.30

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325741

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

685.17

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325472

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAH

State
TX

Zip Code
77381-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325332

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAH

State
TX

Zip Code
77381-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325333

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAH

State
TX

Zip Code
77381-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.50

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325334

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAH

State
TX

Zip Code
77381-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325335

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAH

State
TX

Zip Code
77381-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325336

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.34

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325595

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325642

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325645

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325653

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325655

Amount of Each Receipt this Period

7.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325661

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WADKINS, SHIRLEY, , ,

Mailing Address 3005 NORTHAVEN STREET

City
CORINTH

State
MS

Zip Code
38834-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.15

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325640

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325290

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325293

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325295

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

15.40

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325296

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325297

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITAKER, CINDY, , ,

Mailing Address 3628 COUNTY ROAD 2208

City
GREENVILLE

State
TX

Zip Code
75402-5034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.99

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325348

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITAKER, CINDY, , ,

Mailing Address 3628 COUNTY ROAD 2208

City
GREENVILLE

State
TX

Zip Code
75402-5034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325696

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITAKER, CINDY, , ,

Mailing Address 3628 COUNTY ROAD 2208

City
GREENVILLE

State
TX

Zip Code
75402-5034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325701

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITMAN, TRUDY, , ,

Mailing Address 126 DOVE LANE

City
MENA

State
AR

Zip Code
71953-8024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

213.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325667

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.65

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITMAN, TRUDY, , ,

Mailing Address 126 DOVE LANE

City
MENAState
ARZip Code
71953-8024FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325672

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, JEAN, , ,

Mailing Address 5644 ARAL DRIVE

City
LAKELANDState
FLZip Code
33805-9615FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325594

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLEState
MIZip Code
49418-2259FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

444.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325659

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.75

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325754

Amount of Each Receipt this Period

4621.44

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTI

State
MI

Zip Code
48197-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325932

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEADLE, RALPH, , ,

Mailing Address P.O. BOX 53658

City
LUBBOCK

State
TX

Zip Code
79453-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

611.25

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325872

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325939

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325794

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOYLAN, MAHSHID, , ,

Mailing Address 2019 WHELAN DRIVE

City
SPRING

State
TX

Zip Code
77386-1731

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.70

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325885

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRACHFELD, DONALD, , ,

Mailing Address 25 FOUR SEASONS DRIVE

City
NORTH CALDWELL

State
NJ

Zip Code
07006-6134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325844

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEW

State
DE

Zip Code
19970-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325783

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROOKSHIRE, KEVIN, , ,

Mailing Address P.O. BOX 439

City
GORDONVILLE

State
TX

Zip Code
76245-0439

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325906

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BROOKSHIRE, KEVIN, , ,**

Mailing Address P.O. BOX 439

City
GORDONVILLE

State
TX

Zip Code
76245-0439

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325907

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **CAMARANO, STEVE, , ,**

Mailing Address 3928 MANATEE CLUB DR.

City
RUSKIN

State
FL

Zip Code
33570-6172

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325836

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **CLASON, LEE, , ,**

Mailing Address 11130 NORTH144TH STREET

City
WAVERLY

State
NE

Zip Code
68462-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
TRUCKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325904

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

210.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COX, GORDON, , ,

Mailing Address 19 WOODCREST DRIVE

City
PHENIX CITYState
ALZip Code
36869-5825FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325802

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COX, JERRY, , ,

Mailing Address P.O. BOX 95

City
LENORAHState
TXZip Code
79749-0095FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325835

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COX, JOYCE S, , ,

Mailing Address 50 CONDOLEA CT

City
LAKE OSWEGOState
ORZip Code
97035-1002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

248.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325952

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRIM, PUPPET, , ,

Mailing Address 21351 HWY 140 TRLR 20

City
HESPERUS

State
CO

Zip Code
81326-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325860

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CUSICK, ROBERT, , ,

Mailing Address 4722 SOUTHWEST DOSCH PARK LANE

City
PORTLAND

State
OR

Zip Code
97239-1284

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325948

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DALE, ANNEMARIE, , ,

Mailing Address 2623 ESPINOZA STREET

City
TRINIDAD

State
CO

Zip Code
81082-3936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325781

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGAState
WYZip Code
82331-0399FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325955

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ECHOLS, ELIZABETH, , ,

Mailing Address 369 HUNTINGTON LAKE CIRCLE

City
PAWLEYS ISLANDState
SCZip Code
29585-6174FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325768

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ESSOE, RAMONA, , ,

Mailing Address N33W29231

City
PEWAUKEEState
WIZip Code
53072-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325918

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EVANS, CHARLES, , ,

Mailing Address 20 AUBURN RD

City
LONDONDERRYState
NHZip Code
03053-2247FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2022

Transaction ID : SA17.325784

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FISCHER, MICHAEL, , ,

Mailing Address 3037 N 50TH ST

City
PHOENIXState
AZZip Code
85018-7966FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
08	25	2022

Transaction ID : SA17.325832

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESEY, PAUL, , ,

Mailing Address 174 ELBERT WAY

City
BRISTOLState
VAZip Code
24202-6019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1121.66

Date of Receipt

M M	D D	Y Y Y Y
08	25	2022

Transaction ID : SA17.325805

Amount of Each Receipt this Period

18.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

318.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HELLYER, BRENDA, , ,

Mailing Address 3326, HERBERT DR.

City
PEARLAND

State
TX

Zip Code
77584-7574

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAMILY SMALL BUSINESS

Occupation (for Individual)
OFFICE WORK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.20

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325819

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWINGTON, RICHARD, , ,

Mailing Address 3443 JAMESON LN.

City
WINSTON SALEM

State
NC

Zip Code
27106-4772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.35

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325797

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KEGG, MELISSA, , ,

Mailing Address 3683 DOCKSIDE DR.

City
WARRENTON

State
VA

Zip Code
20187-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325920

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOTLOFF, RONALD, , ,

Mailing Address 167 LUNETA LANE

City

RANCHO MISSION VIE

State

CA

Zip Code

92694-1596

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325815

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAZELL, MAVIS, , ,

Mailing Address 2151 GRACE DR.

City

SANTA ROSA

State

CA

Zip Code

95404-3025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325755

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEMASTER, NANCY, , ,

Mailing Address 105 PINE CREST DRIVE

City

IRONTON

State

OH

Zip Code

45638-3068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BUSINESS OWNER

Occupation (for Individual)

PIZZA

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

3099.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325928

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUSTIK, THOMAS, , ,

Mailing Address 51680 JAMES LAWRENCE PKWY

City
GRANGERState
INZip Code
46530-5630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325886

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKENNA, JACQUELINE, , ,

Mailing Address 1004 VINCENT AVENUE

City
BRONXState
NYZip Code
10465-1525FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325925

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCKENNA, JACQUELINE, , ,

Mailing Address 1004 VINCENT AVENUE

City
BRONXState
NYZip Code
10465-1525FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

656.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325926

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCKENNA, JACQUELINE, , ,

Mailing Address 1004 VINCENT AVENUE

City
BRONXState
NYZip Code
10465-1525FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325927

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NIEMEYER, GREG, , ,

Mailing Address 7908 STANFORD

City
DALLASState
TXZip Code
75225-8210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE-HARALSONOccupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325761

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLBRANTZ, JANET, , ,

Mailing Address 1018 MAIN ST.

City
LUXEMBURGState
WIZip Code
54217-1301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325775

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.40

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325790

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POOL, DONALD, , ,

Mailing Address 10429 SALINAS RIVER CIRCLE

City
FOUNTAIN VALLEY

State
CA

Zip Code
92708-6841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325821

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRUETT, DOUG, , ,

Mailing Address 1932 LINCOLN DRIVE

City
ANNAPOLIS

State
MD

Zip Code
21401-4126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325818

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUNYAN, TROY, , ,

Mailing Address 320 HERITAGE TRAIL

City
GRANBURY

State
TX

Zip Code
76048-5839

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.45

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325786

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAMILENKO, ALEX, , ,

Mailing Address 91B SINGWORTH ST

City
OYSTER BAY

State
NY

Zip Code
11771-3705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CONTRACTOR

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325830

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCOWDEN, TOM, , ,

Mailing Address 3934 MARIETTA WAY

City
SAINT CLOUD

State
FL

Zip Code
34772-8712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

291.25

Date of Receipt

08 / 25 / 2022

Transaction ID : SA17.325808

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 51 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SELLERS, JILL, , ,

Mailing Address 122 DOE MEADOW LANE

City
EL DORADOState
ARZip Code
71730-3987FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325837

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHORE, LYNN, , ,

Mailing Address P.O. BOX 6144

City
BATTLEMENT MESAState
COZip Code
81636-6144FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325763

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STOLL, SANDRA, , ,

Mailing Address 110CR 3694

City
SPRINGTOWNState
TXZip Code
76082-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2022

Transaction ID : SA17.325807

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STOLL, SANDRA, , ,

Mailing Address 110CR 3694

City
SPRINGTOWN

State
TX

Zip Code
76082-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325902

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STONE, CHERYL, , ,

Mailing Address 2955 HANSON LOOP

City
BURBANK

State
WA

Zip Code
99323-9571

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.00

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325874

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STONER, WILLIAM, , ,

Mailing Address 13314 AUTUMN VALLEY DR.

City
CYPRESS

State
TX

Zip Code
77429-3583

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

498.90

Date of Receipt

08 / **25** / **2022**

Transaction ID : SA17.325785

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325806

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325810

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TODD, THOMAS, , ,

Mailing Address 504 SHERWOOD DR.

City
VICTORIA

State
TX

Zip Code
77901-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325811

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

105.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325759

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZABIK, MARY, , ,

Mailing Address 11985 LAKESHORE DRIVE

City
CHARLEVOIXState
MIZip Code
49720-9794FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

787.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325820

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZAREMBO, CATHERINE, , ,

Mailing Address 49 WHITMAN ROAD

City
MADISONState
CTZip Code
06443-1885FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2022

Transaction ID : SA17.325789

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M	D D	Y Y Y Y
08	26	2022

Transaction ID : SA17.325957

Amount of Each Receipt this Period

1283.53

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLEState
TXZip Code
76034-7202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M	D D	Y Y Y Y
08	26	2022

Transaction ID : SA17.326369

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLEState
MDZip Code
21234-3393FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M	D D	Y Y Y Y
08	26	2022

Transaction ID : SA17.326058

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

37.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLEState
MDZip Code
21234-3393FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326059

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLEState
MDZip Code
21234-3393FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326062

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLANKENSHIP, KATHY, , ,

Mailing Address 125 ORCHARD DR.

City
ELIDAState
OHZip Code
45807-1084FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326413

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

2.65

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BORGELT, VIRGINIA, , ,

Mailing Address 6200 TYRONE.

City
YPSILANTIState
MIZip Code
48197-8941FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326155

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BORGELT, VIRGINIA, , ,

Mailing Address 6200 TYRONE.

City
YPSILANTIState
MIZip Code
48197-8941FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326156

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTONState
TXZip Code
77079-3182FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326470

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.95

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326508

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326515

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326516

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326517

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326518

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, CHARLES, , ,

Mailing Address 3220 CUNEEN TRAIL EAST

City
INVER GROVE HEIGHT

State
MN

Zip Code
55076-4540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLCLARKDDS

Occupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

512.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326261

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326042

Amount of Each Receipt this Period

2.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326045

Amount of Each Receipt this Period

0.15

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326046

Amount of Each Receipt this Period

0.15

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

2.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGEState
NJZip Code
08514-2515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326564

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FARRELL, PATRICIA, , ,

Mailing Address 192 HEATHERTON WAY

City
WINSTON SALEMState
NCZip Code
27104-4446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326537

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARRELL, PATRICIA, , ,

Mailing Address 192 HEATHERTON WAY

City
WINSTON SALEMState
NCZip Code
27104-4446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

316.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326538

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

20.40

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLETCHER, HAROLD, , ,

Mailing Address 9664 TROON COURT

City
LAKELAND

State
FL

Zip Code
33810-4358

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326302

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOX, ALLAN, , ,

Mailing Address 316 DEERWOOD LANE NORTH

City
PLYMOUTH

State
MN

Zip Code
55441-6025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326543

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROSS, GARY, , ,

Mailing Address 658 PFEIFER AVENUE

City
VICTORIA

State
KS

Zip Code
67671-9693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326328

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEARTQUIST, PAUL, , ,

Mailing Address 6732 SOUTH PEBBLE BEACH DRIVE

City
CHANDLERState
AZZip Code
85249-4348FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326087

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HINKLE, MARTHA, , ,

Mailing Address 3615 , WENTWORTH DRIVE

City
ARLINGTONState
TXZip Code
76001-5255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326437

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWINGTON, RICHARD, , ,

Mailing Address 3443 JAMESON LN.

City
WINSTON SALEMState
NCZip Code
27106-4772FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.325976

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JUSTICE, CHRISTINE, , ,

Mailing Address 8701 NORTH CLEAR CREEK ROAD

City
HUNTINGTON

State
IN

Zip Code
46750-9739

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.20

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326217

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEAGHER, STACY, , ,

Mailing Address 1 OAK HOLLOW CT.

City
YUBA CITY

State
CA

Zip Code
95991-6273

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.85

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326383

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLN

State
NE

Zip Code
68522-2227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

729.00

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326488

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326318

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326325

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326327

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

15.40

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326552

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326553

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OAK, PATRICIA H, , ,

Mailing Address 1586 DEERHAVEN 2185

City
NORTH LOGANState
UTZip Code
84341-2185FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326216

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAYNE, WILFORD, , ,

Mailing Address P.O. BOX 1267

City
HATTIESBURGState
MSZip Code
39403-1267FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326117

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITYState
OKZip Code
73107-3934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326306

Amount of Each Receipt this Period

9.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITYState
OKZip Code
73107-3934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326307

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITYState
OKZip Code
73107-3934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326309

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITYState
OKZip Code
73107-3934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326312

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITYState
OKZip Code
73107-3934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326314

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326321

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326322

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326329

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326331

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWLEY, BRUCE, , ,

Mailing Address 12035 NORMONT DRIVE

City
HOUSTON

State
TX

Zip Code
77070-2445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326389

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANLEY, SHARON, , ,

Mailing Address 1440 VEGA CIRCLE, UNIT #5

City
IDAHO FALLS

State
ID

Zip Code
83402-1852

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326010

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

5.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEIDEL, CLAIRE, , ,

Mailing Address 10040 E HAPPY VALLEY RD

City
SCOTTSDALEState
AZZip Code
85255-2395FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
DOG JUDGE/WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326526

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326110

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITECAR JR, JOHN P., , ,

Mailing Address 1624 TAYLOR THURSTON ROAD

City
COLUMBUSState
MSZip Code
39701-8597FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GTR ONCOLOGYOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326337

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.45

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITYState
FLZip Code
33868-5113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326436

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326571

Amount of Each Receipt this Period

6094.73

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326573

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

7.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARBER, FRED, , ,

Mailing Address 457 COUNTY ROAD 312

City
FLORESVILLEState
TXZip Code
78114-3406FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326816

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEAVER, CHARLES, , ,

Mailing Address 5461 WARING

City
SAN DIEGOState
CAZip Code
92120-1849FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RUSTSONS TRUCKINGOccupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326748

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENEDETTO, SUZANNE, , ,

Mailing Address 23 STRATTON

City
MIDDLETOWNState
NYZip Code
10940-3113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAIN STREET TITLE SETTLEMENT SVCSOccupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

527.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326830

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

120.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOND, KATHLEEN, , ,

Mailing Address 1715 RIVER ROAD APT 40

City
ST. CLAIRState
MIZip Code
48079-3547FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326686

Amount of Each Receipt this Period

8.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326674

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326678

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

28.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRADEN, ANNETTE, , ,

Mailing Address 10710 MIRASOL DRIVE. BLDG.701

City
MIROMAR LAKES

State
FL

Zip Code
33913-7842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.85

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326644

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326591

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTON

State
TX

Zip Code
77079-3182

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326730

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARRESCIA, ROBERT, , ,

Mailing Address 9515 W. WHITTINGHAM POINT

City
MAPLETON

State
IL

Zip Code
61547-9329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326820

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326839

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHENAULT, MELISSA, , ,

Mailing Address P.O. BOX 93

City
OMENA

State
MI

Zip Code
49674-0093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.350436

Amount of Each Receipt this Period

- 25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHENAULT, MELISSA, , ,

Mailing Address P.O. BOX 93

City
OMENA

State
MI

Zip Code
49674-0093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326624

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLD

State
GA

Zip Code
30736-3228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326628

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLD

State
GA

Zip Code
30736-3228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.70

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326629

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326630

Amount of Each Receipt this Period

1.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326631

Amount of Each Receipt this Period

1.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326632

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

27.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326633

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326634

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326635

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRIM, PUPPET, , ,

Mailing Address 21351 HWY 140 TRLR 20

City
HESPERUS

State
CO

Zip Code
81326-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326702

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CUPPLES, LYNDIA, , ,

Mailing Address 12726 HARTS ISLAND ROAD

City
SHREVEPORT

State
LA

Zip Code
71115-9439

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1490.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326607

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CURL, RICHARD, , ,

Mailing Address 6 QUAIL LAKE RD E

City
PINEHURST

State
NC

Zip Code
28374-8338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326810

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DABISH, WILLIAM, , ,

Mailing Address 44125 W 12 MILE RD

City
NOVI

State
MI

Zip Code
48377-1979

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326750

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DALE, ANNEMARIE, , ,

Mailing Address 2623 ESPINOZA STREET

City
TRINIDAD

State
CO

Zip Code
81082-3936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326821

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DODD, LEISA, , ,

Mailing Address 280 EAGLE ROAD

City
BUCHANAN

State
TN

Zip Code
38222-4033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326727

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DURAN, VICTOR, , ,

Mailing Address 18 CALLE LISA

City
SANTA FE

State
NM

Zip Code
87507-4268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326852

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLSWORTH, CLARENCE, , ,

Mailing Address 8059 NORTH HIBISCUS LANE

City
COEUR D ALENE

State
ID

Zip Code
83815-0081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326818

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326609

Amount of Each Receipt this Period

7.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326610

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326611

Amount of Each Receipt this Period

8.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326612

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326621

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326623

Amount of Each Receipt this Period

20.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326693

Amount of Each Receipt this Period

8.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

33.22

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326694

Amount of Each Receipt this Period

8.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326695

Amount of Each Receipt this Period

15.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLAState
NYZip Code
11501-3423FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326828

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

33.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAHNEMANN, ARTUR, , ,

Mailing Address 4510 140 AVE SE

City
BELLEVUEState
WAZip Code
98006-2343FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326777

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAHNEMANN, ARTUR, , ,

Mailing Address 4510 140 AVE SE

City
BELLEVUEState
WAZip Code
98006-2343FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326779

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONTState
ILZip Code
61568-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326808

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERNANDEZ, SHARON, , ,

Mailing Address 2415 CREEK MEADOW DR.

City
HOUSTONState
TXZip Code
77084-5201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATY ISDOccupation (for Individual)
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326584

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERNANDEZ, SHARON, , ,

Mailing Address 2415 CREEK MEADOW DR.

City
HOUSTONState
TXZip Code
77084-5201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATY ISDOccupation (for Individual)
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326586

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEUER, RANDY, , ,

Mailing Address 1218 SUNRISE CIRCLE

City
MUSCATINEState
IAZip Code
52761-3631FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MUSCATINE COUNTY ABSTRACT COMPANYOccupation (for Individual)
ABTRACTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326749

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

50.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUGHINS, HAROLD, , ,

Mailing Address 479 CREIGHTON ROAD

City
FLEMING ISLAND

State
FL

Zip Code
32003-7477

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.35

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326761

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JAHN, TERESA, , ,

Mailing Address 13467 SUMPTER STAGE HWY

City
BAKER CITY

State
OR

Zip Code
97814-7909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.96

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326789

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JESALVA, CHITA, , ,

Mailing Address 22309 92ND AVENUE WEST

City
EDMONDS

State
WA

Zip Code
98020-4504

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.70

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326858

Amount of Each Receipt this Period

4.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, CRAIG, , ,

Mailing Address 1070 WINDY SHORE DRIVE

City
COLDWATER

State
MI

Zip Code
49036-8024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326844

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326773

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326775

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326776

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326778

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326780

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

45.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 91 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326781

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRIBS, LEONARD, , ,

Mailing Address 2314 ASHLAND STREET

City
HOUSTON

State
TX

Zip Code
77008-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326719

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUEHNE, CARL, , ,

Mailing Address 4479 HERITAGE HEIGHTS ROAD

City
DE PERE

State
WI

Zip Code
54115-9254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CK HOLDINGS

Occupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.50

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326769

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUEHNE, CARL, , ,

Mailing Address 4479 HERITAGE HEIGHTS ROAD

City
DE PERE

State
WI

Zip Code
54115-9254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CK HOLDINGS

Occupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326771

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANG, RICHARD, , ,

Mailing Address 719 15TH AVE E

City
SEATTLE

State
WA

Zip Code
98112-4525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326605

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANIUS, BARBARA, , ,

Mailing Address 12662 HARRIET CIRCLE

City
DALLAS

State
TX

Zip Code
75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326807

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

82.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEWIS, GREGORY, , ,

Mailing Address 312 W COMSTOCK ST

City
SEATTLE

State
WA

Zip Code
98119-3522

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326675

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, GREGORY, , ,

Mailing Address 312 W COMSTOCK ST

City
SEATTLE

State
WA

Zip Code
98119-3522

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326677

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOPEZ, DAVID, , ,

Mailing Address 20845 WEST CARVER ROAD

City
BUCKEYE

State
AZ

Zip Code
85326-4198

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CANAM STEEL CORP

Occupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

776.75

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326582

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOPEZ, DAVID, , ,

Mailing Address 20845 WEST CARVER ROAD

City
BUCKEYEState
AZZip Code
85326-4198FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CANAM STEEL CORPOccupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326598

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCracken, DONALD, , ,

Mailing Address 5674 LONGWOOD STREET

City
BEAUMONTState
TXZip Code
77707-1892FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326671

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOON, KAREN MARIE, , ,

Mailing Address 35490 CAMP CREEK ROAD

City
SPRINGFIELDState
ORZip Code
97478-8772FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326822

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

135.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOON, KAREN MARIE, , ,

Mailing Address 35490 CAMP CREEK ROAD

City
SPRINGFIELD

State
OR

Zip Code
97478-8772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326823

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOSS, PATRICIA, , ,

Mailing Address 2665 WHISPERING PINE

City
TWIN FALLS

State
ID

Zip Code
83301-8939

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326643

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWSOME, HELENE, , ,

Mailing Address 4043 CARLYLE LAKES BLVD

City
PALM HARBOR

State
FL

Zip Code
34685-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HEALTHCARE

Occupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326728

Amount of Each Receipt this Period

18.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

88.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEMEYER, GREG, , ,

Mailing Address 7908 STANFORD

City
DALLASState
TXZip Code
75225-8210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE-HARALSONOccupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326838

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NORVILLE, GARY, , ,

Mailing Address N93W25911 COUNTRY CT

City
COLGATEState
WIZip Code
53017-9663FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326864

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326664

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326665

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326666

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326667

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326853

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326854

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326855

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEIPPO, RAIJA, , ,

Mailing Address 3217 BELLE AVENUE

City
DENISON

State
TX

Zip Code
75020-7356

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.15

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326622

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIGBY, RALPH, , ,

Mailing Address 7133 BARNWELL PLACE

City
FAYETTEVILLE

State
NC

Zip Code
28303-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.35

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326572

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANDSTROM, JOHN, , ,

Mailing Address 17101 408TH ST. SW.

City
PLAZA

State
ND

Zip Code
58771-9691

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326836

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 100 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326768

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326738

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2022

Transaction ID : SA17.326740

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326814

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TESAR, MICHAEL, , ,

Mailing Address 10 AURORA DRIVE

City
ROLLING HILLS ESTA

State
CA

Zip Code
90274-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1843.74

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326713

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRUELOVE, BOBBY, , ,

Mailing Address P.O. BOX 562

City
GARRISON

State
TX

Zip Code
75946-0562

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 26 / 2022

Transaction ID : SA17.326696

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VANDER VORSTE, CRAIG, , ,

Mailing Address 12370 EAST 37TH STREET

City
YUMAState
AZZip Code
85367-5900FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.30

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326647

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, DAVID, , ,

Mailing Address 7112 RICHLAND RD.

City
FORT WORTH AState
TXZip Code
76118-5138FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326826

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, DAVID, , ,

Mailing Address 7112 RICHLAND RD.

City
FORT WORTH AState
TXZip Code
76118-5138FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA17.326827

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZANIOS, JAMES (JIM), , ,

Mailing Address P.O. BOX 7005

City
ALBUQUERQUE

State
NM

Zip Code
87194-7005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.35

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326660

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLE

State
MI

Zip Code
49418-2259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.65

Date of Receipt

08 / **26** / **2022**

Transaction ID : SA17.326662

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, JOHN, , ,

Mailing Address 6023 E 47TH ST

City
YUMA

State
AZ

Zip Code
85365-6351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.350464

Amount of Each Receipt this Period

- 10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, JOHN, , ,

Mailing Address 6023 E 47TH ST

City
YUMA

State
AZ

Zip Code
85365-6351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.350465

Amount of Each Receipt this Period

– 10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, JOHN, , ,

Mailing Address 6023 E 47TH ST

City
YUMA

State
AZ

Zip Code
85365-6351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.350466

Amount of Each Receipt this Period

– 10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.326866

Amount of Each Receipt this Period

1347.18

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

– 20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, CHRIS, , ,

Mailing Address 116 PARK AVE

City
CUMBERLAND

State
MD

Zip Code
21502-7100

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327261

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAKER, RUDY, , ,

Mailing Address 1016 SWIFT CREEK DRIVE

City
CLAYTON

State
NC

Zip Code
27520-9737

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327165

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327022

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERKGREN, GARRY D, , ,

Mailing Address 122 PLUM AVE

City
OAKLEY

State
KS

Zip Code
67748-1248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5935.60

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327197

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEST, SAMMY, , ,

Mailing Address 1807FM 3240

City
BANDERA

State
TX

Zip Code
78003-5233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.60

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327322

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOND, KATHLEEN, , ,

Mailing Address 1715 RIVER ROAD APT 40

City
ST. CLAIR

State
MI

Zip Code
48079-3547

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1178.47

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.326905

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.326909

Amount of Each Receipt this Period

0.12

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.326910

Amount of Each Receipt this Period

0.12

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTON

State
TX

Zip Code
77079-3182

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327120

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.49

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURGESS, BARBARA, , ,

Mailing Address 3177 CHERRY MEADOW PATH

City
LEXINGTON

State
KY

Zip Code
40509-8547

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.55

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327158

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327145

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, CHARLES, , ,

Mailing Address 3220 CUNEEN TRAIL EAST

City
INVER GROVE HEIGHT

State
MN

Zip Code
55076-4540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLCLARKDDSD

Occupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

512.70

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.326995

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLSWORTH, CLARENCE, , ,

Mailing Address 8059 NORTH HIBISCUS LANE

City
COEUR D ALENE

State
ID

Zip Code
83815-0081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.50

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.326877

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLSWORTH, CLARENCE, , ,

Mailing Address 8059 NORTH HIBISCUS LANE

City
COEUR D ALENE

State
ID

Zip Code
83815-0081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.50

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.326878

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLSWORTH, CLARENCE, , ,

Mailing Address 8059 NORTH HIBISCUS LANE

City
COEUR D ALENE

State
ID

Zip Code
83815-0081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.50

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.326879

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLSWORTH, CLARENCE, , ,

Mailing Address 8059 NORTH HIBISCUS LANE

City
COEUR D ALENE

State
ID

Zip Code
83815-0081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.326880

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ESSOE, RAMONA, , ,

Mailing Address N33W29231

City
PEWAUKEE

State
WI

Zip Code
53072-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327161

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FERGUSON, JENNIFER, , ,

Mailing Address 3002 OAK KNOB STREET

City
TYLER

State
TX

Zip Code
75701-8111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.326941

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACHState
FLZip Code
33408-1952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326949

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACHState
FLZip Code
33408-1952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326952

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326890

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326891

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326893

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLBEN, MELVIN, , ,

Mailing Address 407 KATIELEE COVE, DALLAS, GA 3013

City
DALLASState
GAZip Code
13032-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326966

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

2.15

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOWES, ALVIN, , ,

Mailing Address 1841 ARBOR KNOLL LOOP

City
TRINITY

State
FL

Zip Code
34655-7205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327296

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUEHNE, CARL, , ,

Mailing Address 4479 HERITAGE HEIGHTS ROAD

City
DE PERE

State
WI

Zip Code
54115-9254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CK HOLDINGS

Occupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.326929

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327349

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

18.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327350

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327351

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327352

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327355

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327356

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327357

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAWS, LOIS, , ,

Mailing Address 563 FORESTWOOD DR.

City
COLUMBUS

State
OH

Zip Code
43230-2059

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.350410

Amount of Each Receipt this Period

- 10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAWS, LOIS, , ,

Mailing Address 563 FORESTWOOD DR.

City
COLUMBUS

State
OH

Zip Code
43230-2059

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327149

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LYMYCH, MARC, , ,

Mailing Address 1720 NE 11TH STREET

City
FORT LAUDERDALE

State
FL

Zip Code
33304-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

246.50

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327238

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCORMACK, BETSY, , ,

Mailing Address 722 EAGLE POINT DRIVE

City
VENICEState
FLZip Code
34285-6022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326922

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCOY, DANIEL, , ,

Mailing Address 7840 JOYCE DRIVE

City
CLEVELANDState
OHZip Code
44130-7149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327204

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACHState
FLZip Code
32168-7940FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326965

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327008

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327011

Amount of Each Receipt this Period

0.19

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRISON, BESSIE, , ,

Mailing Address 3120 , LEWIS RD.

City
COLUMBUS

State
OH

Zip Code
43207-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.10

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327092

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORRISON, BESSIE, , ,

Mailing Address 3120 , LEWIS RD.

City
COLUMBUS

State
OH

Zip Code
43207-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.10

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327093

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORRISON, BESSIE, , ,

Mailing Address 3120 , LEWIS RD.

City
COLUMBUS

State
OH

Zip Code
43207-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.10

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327095

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRISON, BESSIE, , ,

Mailing Address 3120 , LEWIS RD.

City
COLUMBUS

State
OH

Zip Code
43207-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.10

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327096

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 120 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORRISON, BESSIE, , ,

Mailing Address 3120 , LEWIS RD.

City
COLUMBUS

State
OH

Zip Code
43207-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327100

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MYERS, STEVE, , ,

Mailing Address 711 N 2ND ST

City
ENID

State
OK

Zip Code
73701-3244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327175

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYERS, STEVE, , ,

Mailing Address 711 N 2ND ST

City
ENID

State
OK

Zip Code
73701-3244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

710.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327177

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326959

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326961

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326962

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326963

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326964

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327045

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

5.20

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 1424

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327046

Amount of Each Receipt this Period

4.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327047

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327048

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

34.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 124 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327049

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYDState
TXZip Code
76023-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327051

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITYState
OKZip Code
73107-3934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326953

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

30.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITYState
OKZip Code
73107-3934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326956

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITYState
OKZip Code
73107-3934FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326957

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COASTState
FLZip Code
32137-2702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327260

Amount of Each Receipt this Period

0.05

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

70.05

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, GARLAND, , ,

Mailing Address 585 FOXDALE LOOP W

City
SOUTHAVENState
MSZip Code
38672-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.326907

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPIEGL, PETER, , ,

Mailing Address W7106 PULS FARM PLACE

City
GREENVILLEState
WIZip Code
54942-9501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327248

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOWState
VAZip Code
20136-2532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327259

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 127 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.326928

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.34

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327180

Amount of Each Receipt this Period

0.07

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TYRHOLM, MICHAEL, , ,

Mailing Address 3510 COLLIER LANE

City
KLAMATH FALLS

State
OR

Zip Code
97603-9643

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.326896

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.12

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLEState
FLZip Code
33772-2660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327065

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITYState
FLZip Code
33868-5113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327079

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327358

Amount of Each Receipt this Period

6381.85

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327555

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327556

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327592

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327596

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327432

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327433

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOLINDER, DAVE, , ,

Mailing Address 5500 EAST PORCUPINE AVENUE

City
WASILLAState
AKZip Code
99654-4602FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BOLINDER EXCAVATINGOccupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022**Transaction ID : SA17.327609**

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022**Transaction ID : SA17.327443**

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022**Transaction ID : SA17.327477**

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

520.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRADEN, ANNETTE, , ,

Mailing Address 10710 MIRASOL DRIVE. BLDG.701

City
MIROMAR LAKESState
FLZip Code
33913-7842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327519

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRADEN, ANNETTE, , ,

Mailing Address 10710 MIRASOL DRIVE. BLDG.701

City
MIROMAR LAKESState
FLZip Code
33913-7842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327520

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, ELLEN, , ,

Mailing Address P.O. BOX 2156

City
SILSBEEState
TXZip Code
77656-2156FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327578

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROWN, RICHARD, , ,

Mailing Address 3131 E LEGACY DR. #1022

City
PHOENIX

State
AZ

Zip Code
85042-6026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327585

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTON

State
TX

Zip Code
77079-3182

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327490

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARLTON, STEVEN, , ,

Mailing Address 43 WHITE CLIFFS DR.

City
PLYMOUTH

State
MA

Zip Code
02360-8009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327457

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASTRO, JAIME, , ,

Mailing Address 3993 ROBERTS POINT ROAD

City
SIESTA KEY

State
FL

Zip Code
34242-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327469

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONNOR, VERNON, , ,

Mailing Address 3387 BRAEMAR DR.

City
CHAMBERSBURG

State
PA

Zip Code
17202-7015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLONY HOUSE

Occupation (for Individual)
RETAIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327405

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COX, WILLIAM, , ,

Mailing Address 4002 EAST EL CARMEN AVENUE

City
ORANGE

State
CA

Zip Code
92869-2641

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327437

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CSOMBOK, MAUREEN, , ,

Mailing Address 1035 WEST 9TH ST.

City
ERIEState
PAZip Code
16502-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327388

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DENDY, PHYLLIS, , ,

Mailing Address 1808 N. AVENUE H

City
HASKELLState
TXZip Code
79521-3018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327377

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEVETTE, JACK, , ,

Mailing Address 8610 GARBOW DR. SE

City
ALTOState
MIZip Code
49302-9166FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

322.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327504

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIAZ, ZOILA, , ,

Mailing Address 1430 SOUTHWEST 15TH STREET

City
MIAMI

State
FL

Zip Code
33145-1506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327361

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGE

State
NJ

Zip Code
08514-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327573

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FALKNER, RUSSELL, , ,

Mailing Address 1525 EAST LONE STAR ROAD

City
SAFFORD

State
AZ

Zip Code
85546-9334

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARRISON AUTO SERVICE

Occupation (for Individual)
MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327565

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACHState
FLZip Code
33408-1952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327552

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327541

Amount of Each Receipt this Period

8.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327542

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

68.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNION

State
NJ

Zip Code
07083-7427

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327544

Amount of Each Receipt this Period

18.85

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327598

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAWORTH, RONALD, , ,

Mailing Address P O BOX 8435

City
HOBE SOUND

State
FL

Zip Code
33475-8435

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327588

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEARTQUIST, PAUL, , ,

Mailing Address 6732 SOUTH PEBBLE BEACH DRIVE

City
CHANDLER

State
AZ

Zip Code
85249-4348

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.50

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327600

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KINER, JAIMEE, , ,

Mailing Address 20225 EYOTA COURT

City
APPLE VALLEY

State
CA

Zip Code
92308-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.25

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327406

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANIUS, BARBARA, , ,

Mailing Address 12662 HARRIET CIRCLE

City
DALLAS

State
TX

Zip Code
75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327580

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LIGHT, PATRICE, , ,

Mailing Address 763 EMBERGLOW LANE

City
LITTLETON

State
CO

Zip Code
80126-5736

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PEAKVUE

Occupation (for Individual)
SMALL BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327530

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LIGHT, PATRICE, , ,

Mailing Address 763 EMBERGLOW LANE

City
LITTLETON

State
CO

Zip Code
80126-5736

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PEAKVUE

Occupation (for Individual)
SMALL BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327531

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUSTIK, THOMAS, , ,

Mailing Address 51680 JAMES LAWRENCE PKWY

City
GRANGER

State
IN

Zip Code
46530-5630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

371.50

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327560

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCDONALD, JESSE, , ,

Mailing Address 108 SEVILLE PL

City
STARKVILLE

State
MS

Zip Code
39759-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.35

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327366

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEYER, MARK, , ,

Mailing Address 8810. , CYPRESS CREEK PARKWAY

City
HOUSTON

State
TX

Zip Code
77070-5518

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AWEOME

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327376

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327378

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327379

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327380

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327382

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

58.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327383

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MONTGOMERY, RICHARD, , ,

Mailing Address 17903 ECHOBEND LN

City
SPRINGState
TXZip Code
77379-4029FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MERCHANTS METALSOccupation (for Individual)
CSR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327389

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUMFORD, PEGGY, , ,

Mailing Address 10402 GOLF COURSE RD

City
OCEAN CITYState
MDZip Code
21842-9100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

781.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327539

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUMFORD, PEGGY, , ,

Mailing Address 10402 GOLF COURSE RD

City
OCEAN CITY

State
MD

Zip Code
21842-9100

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

781.85

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327545

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUMFORD, PEGGY, , ,

Mailing Address 10402 GOLF COURSE RD

City
OCEAN CITY

State
MD

Zip Code
21842-9100

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

781.85

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327547

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NIEMEYER, GREG, , ,

Mailing Address 7908 STANFORD

City
DALLAS

State
TX

Zip Code
75225-8210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE-HARALSON

Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.75

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327447

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327536

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327537

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327538

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327540

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORR, CHUCK, , ,

Mailing Address 415 S SPAULDING AVE

City
PUEBLOState
COZip Code
81007-2899FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327434

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OSTERLOH, RITA, , ,

Mailing Address 2020 ARROWHEAD DRIVE

City
OAKLANDState
CAZip Code
94611-1462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2022

Transaction ID : SA17.327464

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PITMAN, EDGAR, , ,

Mailing Address P.O. BOX 5248, 17360 RANCHO TEHAMA

City
CORNING

State
CA

Zip Code
96021-5248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327362

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POUTEAU, SUZANNE, , ,

Mailing Address 5201 TERRA GRANADA DRIVE

City

WALNUT CREEK

State

CA

Zip Code

94595-4084

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327410

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City

RENO

State

NV

Zip Code

89509-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.15

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327450

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327442

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAYLOR, JILL, , ,

Mailing Address 10455 O' BRIEN CREEK ROAD

City
MISSOULA

State
MT

Zip Code
59804-5849

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1056.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327525

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, MARILYN, , ,

Mailing Address 6859 RALARIC DRIVE

City
DEXTER

State
MI

Zip Code
48130-9689

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2022

Transaction ID : SA17.327371

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

56.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TODD, THOMAS, , ,

Mailing Address 504 SHERWOOD DR.

City
VICTORIA

State
TX

Zip Code
77901-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.98

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327416

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TODD, THOMAS, , ,

Mailing Address 504 SHERWOOD DR.

City
VICTORIA

State
TX

Zip Code
77901-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.98

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327426

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TORRES, CHARLES, , ,

Mailing Address 16280 LONDON COURT

City
RIVERSIDE

State
CA

Zip Code
92504-5751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFINITY

Occupation (for Individual)
BAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327586

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRUDEAU, DANIEL, , ,

Mailing Address P.O. BOX 622

City
SANTA ROSA

State
CA

Zip Code
95402-0622

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327429

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRUE, KAREN, , ,

Mailing Address 14641 GLEN COVE DRIVE 1702

City
FORT MYERS

State
FL

Zip Code
33919-7442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.20

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327441

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAN DENEND, GARY, , ,

Mailing Address 133 NORTH 3RD STREET

City
RIPLEY

State
OH

Zip Code
45167-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GLENRO INC

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2599.25

Date of Receipt

08 / **27** / **2022**

Transaction ID : SA17.327412

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WARNER, JEFFREY, , ,

Mailing Address 575 REMBRANDT DRIVE

City
CORONA

State
CA

Zip Code
92882-6332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327403

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WASSON, MARIAN, , ,

Mailing Address 1620 BUCKLEVEL RD

City
GREENWOOD

State
SC

Zip Code
29649-9755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.60

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327524

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITAKER, CINDY, , ,

Mailing Address 3628 COUNTY ROAD 2208

City
GREENVILLE

State
TX

Zip Code
75402-5034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.99

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327587

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOODCOCK, WARREN, , ,

Mailing Address 8036 C.R. 313 EAST #2

City
TYLER

State
TX

Zip Code
75706-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WARREN WOODCOCK

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327543

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUNG, LINDA, , ,

Mailing Address 2040 CEDAR POINT LANE

City
CUMMING

State
GA

Zip Code
30041-7255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FORSYTH COUNTY BOE

Occupation (for Individual)
TEACHER ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.80

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327604

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNG, LINDA, , ,

Mailing Address 2040 CEDAR POINT LANE

City
CUMMING

State
GA

Zip Code
30041-7255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FORSYTH COUNTY BOE

Occupation (for Individual)
TEACHER ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.80

Date of Receipt

08 / 27 / 2022

Transaction ID : SA17.327605

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327617

Amount of Each Receipt this Period

1173.34

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AMYX , PATRICIA , , ,

Mailing Address 4382 NORTH ROSEPOINT AVENUE

City
MERIDIAN

State
ID

Zip Code
83646-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328358

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BABCOCK, PAUL, , ,

Mailing Address P.O. BOX 661

City
SAG HARBOR

State
NY

Zip Code
11963-0017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PROP MNGMNT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327819

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BABCOCK, PAUL, , ,

Mailing Address P.O. BOX 661

City
SAG HARBOR

State
NY

Zip Code
11963-0017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PROP MNGMNT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327820

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327871

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328306

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASEMENT, SANDRA, , ,

Mailing Address 28356 ALAVA

City
MISSION VIEJO

State
CA

Zip Code
92692-1634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327700

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOI, RUBY, , ,

Mailing Address POBOX 4877

City
FOSTER CITY

State
CA

Zip Code
94404-0877

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327722

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COURSON, CARL, , ,

Mailing Address 900 N E 3RD STREET

City
BELLE GLADE

State
FL

Zip Code
33430-2042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BIG LAKE SNACK SALES, INC

Occupation (for Individual)
V PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328092

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGEState
NJZip Code
08514-2515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328281

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.327936

Amount of Each Receipt this Period

0.71

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.327939

Amount of Each Receipt this Period

0.80

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.56

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.327941

Amount of Each Receipt this Period

3.55

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.327942

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLOURNOY, BRIAN, , ,

Mailing Address 6003 ARDEN ST

City
SHREVEPORT

State
LA

Zip Code
71106-2301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TYGR

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

304.00

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328043

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GATTI, PATRICIA, , ,

Mailing Address 1706 EAST 52ND STREET

City
BROOKLYN

State
NY

Zip Code
11234-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.87

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327648

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GATTI, PATRICIA, , ,

Mailing Address 1706 EAST 52ND STREET

City
BROOKLYN

State
NY

Zip Code
11234-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.87

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327651

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328405

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328406

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328399

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROSS, GARY, , ,

Mailing Address 658 PFEIFER AVENUE

City
VICTORIA

State
KS

Zip Code
67671-9693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.30

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328307

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328380

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328381

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARDY, KARIN S, , ,

Mailing Address 1590 KELLOGG BAY RD

City
VERGENNES

State
VT

Zip Code
05491-9070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

505.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328137

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONTState
ILZip Code
61568-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.350408

Amount of Each Receipt this Period

- 0.25

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONTState
ILZip Code
61568-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328361

Amount of Each Receipt this Period

0.25

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, LARRY, , ,

Mailing Address 401 RAMBLIN LANE

City
ROSEBURGState
ORZip Code
97471-9749FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

457.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.327898

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KINER, JAIMEE, , ,

Mailing Address 20225 EYOTA COURT

City
APPLE VALLEY

State
CA

Zip Code
92308-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.25

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327785

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KINER, JAIMEE, , ,

Mailing Address 20225 EYOTA COURT

City
APPLE VALLEY

State
CA

Zip Code
92308-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.25

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327786

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KINER, JAIMEE, , ,

Mailing Address 20225 EYOTA COURT

City
APPLE VALLEY

State
CA

Zip Code
92308-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

266.25

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327840

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAIRD, JANET, , ,

Mailing Address 13031 SUNDANCE AVENUE

City
SAN DIEGO

State
CA

Zip Code
92129-2397

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327890

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEHMAN, CAROL, , ,

Mailing Address 3757 TRENER DRIVE

City
PLEASANTON

State
CA

Zip Code
94588-4115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327969

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACPHERSON, LINDA, , ,

Mailing Address 1242 25TH STREET

City
OGDEN

State
UT

Zip Code
84401-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328284

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.80

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328127

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOK, LIMING, , ,

Mailing Address 29726 COJAK CIRCLE

City
BOERNEState
TXZip Code
78015-4521FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328413

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOK, LIMING, , ,

Mailing Address 29726 COJAK CIRCLE

City
BOERNEState
TXZip Code
78015-4521FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

663.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328414

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

12.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOK, LIMING, , ,

Mailing Address 29726 COJAK CIRCLE

City
BOERNE

State
TX

Zip Code
78015-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328415

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUMENTHALER, FREDERICK, , ,

Mailing Address 100 OXFORD ROAD

City
LANSDALE

State
PA

Zip Code
19446-4758

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

918.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327949

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MYERS, STEVE, , ,

Mailing Address 711 N 2ND ST

City
ENID

State
OK

Zip Code
73701-3244

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

710.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328161

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MYERS, STEVE, , ,

Mailing Address 711 N 2ND ST

City
ENIDState
OKZip Code
73701-3244FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328163

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MYERS, STEVE, , ,

Mailing Address 711 N 2ND ST

City
ENIDState
OKZip Code
73701-3244FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328164

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, EVELYN, , ,

Mailing Address 904 SOUTH MAIN STREET

City
MILBANKState
SDZip Code
57252-2924FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NELSON LAW OFFICEOccupation (for Individual)
LEGAL SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.327695

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.60

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEARSON, LEONARD, , ,

Mailing Address 579 VINA ROSE DRIVE

City
PETALUMA

State
CA

Zip Code
94954-1311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.40

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328247

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEIPPO, RAIJA, , ,

Mailing Address 3217 BELLE AVENUE

City
DENISON

State
TX

Zip Code
75020-7356

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.15

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327672

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PENCE, JOHN, , ,

Mailing Address 1404 SOUTH BASIN ROAD

City
COLVILLE

State
WA

Zip Code
99114-8511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMADA AMERICA INC

Occupation (for Individual)
SALES ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.80

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327631

Amount of Each Receipt this Period

0.45

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.80

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PENCE, JOHN, , ,

Mailing Address 1404 SOUTH BASIN ROAD

City
COLVILLEState
WAZip Code
99114-8511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMADA AMERICA INCOccupation (for Individual)
SALES ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328423

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEONOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328033

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGASState
NVZip Code
89135-1711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328096

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGAS

State
NV

Zip Code
89135-1711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.30

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328099

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGAS

State
NV

Zip Code
89135-1711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.30

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328100

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROHRBACH JR, GRANT J., , ,

Mailing Address 1220 CHESTNUT ST

City
POTTSTOWN

State
PA

Zip Code
19464-4928

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.35

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328103

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSEN, CARL, , ,

Mailing Address 2046 US HWY 441N

City
DUBLIN

State
GA

Zip Code
31021-0347

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARL VINSON VA

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328150

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHERMBECK, JULIE, , ,

Mailing Address 2043 HAMILTON NEW LONDON RD

City
HAMILTON

State
OH

Zip Code
45013-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328102

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHLICHTINGER, CARL, , ,

Mailing Address 97 DURANT AVENUE

City
STATEN ISLAND

State
NY

Zip Code
10306-3853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF - PART TIME

Occupation (for Individual)
PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.327679

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHLICHTINGER, CARL, , ,

Mailing Address 97 DURANT AVENUE

City
STATEN ISLANDState
NYZip Code
10306-3853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF - PART TIMEOccupation (for Individual)
PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.327681

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHLICHTINGER, CARL, , ,

Mailing Address 97 DURANT AVENUE

City
STATEN ISLANDState
NYZip Code
10306-3853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF - PART TIMEOccupation (for Individual)
PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.327682

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHLICHTINGER, CARL, , ,

Mailing Address 97 DURANT AVENUE

City
STATEN ISLANDState
NYZip Code
10306-3853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF - PART TIMEOccupation (for Individual)
PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.327719

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.85

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWARTZ, STEVEN, , ,

Mailing Address 1436 S BENTLEY AVE

City
LOS ANGELES

State
CA

Zip Code
90025-3475

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327863

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPIEGL, PETER, , ,

Mailing Address W7106 PULS FARM PLACE

City
GREENVILLE

State
WI

Zip Code
54942-9501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.30

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327740

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

685.17

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327982

Amount of Each Receipt this Period

0.03

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.53

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSING

State
ID

Zip Code
83639-5511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328395

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STONER, WILLIAM, , ,

Mailing Address 13314 AUTUMN VALLEY DR.

City
CYPRESS

State
TX

Zip Code
77429-3583

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.90

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328342

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAH

State
TX

Zip Code
77381-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.50

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.327864

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAHState
TXZip Code
77381-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2022

Transaction ID : SA17.327867

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAHState
TXZip Code
77381-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2022

Transaction ID : SA17.327868

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAHState
TXZip Code
77381-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2022

Transaction ID : SA17.327869

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TOMASIK, LORI, , ,

Mailing Address 157 RESERVOIR ROAD

City
PARSIPPANY

State
NJ

Zip Code
07054-1379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DANMARC

Occupation (for Individual)
ADMN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.10

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328153

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATSON, ERIC, , ,

Mailing Address 1000 NE 95TH ST

City
OCALA

State
FL

Zip Code
34479-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.45

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.327818

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328400

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328430

Amount of Each Receipt this Period

3947.74

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADAIR, JUDY, , ,

Mailing Address 200 S.BOSQUE, 318

City
WHITNEY

State
TX

Zip Code
76692-2713

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328577

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALBACH, ROBERT, , ,

Mailing Address 12791. CREEL RD

City
GRAND BAY

State
AL

Zip Code
36541-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

873.55

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328513

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALBACH, ROBERT, , ,

Mailing Address 12791. CREEL RD

City
GRAND BAY

State
AL

Zip Code
36541-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.55

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328516

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALBACH, ROBERT, , ,

Mailing Address 12791. CREEL RD

City
GRAND BAY

State
AL

Zip Code
36541-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.55

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328521

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLE

State
IL

Zip Code
60532-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328530

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BACZYNSKI, JOHN, , ,

Mailing Address 16316 W. INDIANOLA AVE.

City
GOODYEARState
AZZip Code
85395-7657FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328502

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEADLE, RALPH, , ,

Mailing Address P.O. BOX 53658

City
LUBBOCKState
TXZip Code
79453-3658FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328474

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENAVIDES, GLORIA J, , ,

Mailing Address 146 MARLENA DR.

City
SAN ANTONIOState
TXZip Code
78213-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328448

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

85.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BIERWIRTH III, GEORGE, , ,

Mailing Address 7116 WEST 2ND STREET

City
RIO LINDA

State
CA

Zip Code
95673-2027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328589

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BORGELT, VIRGINIA, , ,

Mailing Address 6200 TYRONE.

City
YPSILANTI

State
MI

Zip Code
48197-8941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.70

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328459

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BORGELT, VIRGINIA, , ,

Mailing Address 6200 TYRONE.

City
YPSILANTI

State
MI

Zip Code
48197-8941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.70

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328460

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BORGELT, VIRGINIA, , ,

Mailing Address 6200 TYRONE.

City
YPSILANTIState
MIZip Code
48197-8941FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328462

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CALKINS, DAVID, , ,

Mailing Address 620 FOUR HILLS RD SE

City
ALBUQUERQUEState
NMZip Code
87123-4106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328466

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CALKINS, DAVID, , ,

Mailing Address 620 FOUR HILLS RD SE

City
ALBUQUERQUEState
NMZip Code
87123-4106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328467

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARAWAY, GLENNIE, , ,

Mailing Address 3906 PENINSULA DR.

City
LAUDERDALE

State
MS

Zip Code
39335-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328538

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARLTON, RACHAEL, , ,

Mailing Address 8761 STATE RD 78W LOT 50

City
OKEECHOBEE

State
FL

Zip Code
34974-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1146.25

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328571

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CORDER, JAMES, , ,

Mailing Address 201 ALLISON DRIVE

City
STEARNS

State
KY

Zip Code
42647-6361

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOPE

Occupation (for Individual)
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328499

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIERLAM, MARK, , ,

Mailing Address 7737 LAKERIDGE LOOP

City
MONTGOMERYState
ALZip Code
36117-7423FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328565

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUNCANDUDGEON, CHERYL, , ,

Mailing Address 7822 HIDDEN OAKS LANE

City
HOUSTONState
TXZip Code
77095-4123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328435

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUNCANDUDGEON, CHERYL, , ,

Mailing Address 7822 HIDDEN OAKS LANE

City
HOUSTONState
TXZip Code
77095-4123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328436

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EATON, RANDY, , ,

Mailing Address 513 EAST 2ND AVE.

City
INDIANOLAState
IAZip Code
50125-2709FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	2	2		

Transaction ID : SA17.328439

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FARRELL, PATRICIA, , ,

Mailing Address 192 HEATHERTON WAY

City
WINSTON SALEMState
NCZip Code
27104-4446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.40

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	2	2		

Transaction ID : SA17.328506

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FITZGERALD, SUSAN, , ,

Mailing Address 4450 FLORIDA STREET

City
SAN DIEGOState
CAZip Code
92116-4002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	2	2		

Transaction ID : SA17.328574

Amount of Each Receipt this Period

80.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOERING, LEROY, , ,

Mailing Address 29497 THE YELLOW BRICK RD

City
VALLEY CENTER

State
CA

Zip Code
92082-7663

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328552

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, TIM, , ,

Mailing Address 9235 BRUMBELOW ROAD

City
ALPHARETTA

State
GA

Zip Code
30022-5230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QEM

Occupation (for Individual)
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328480

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HODGSON, JANICE, , ,

Mailing Address 2920 NEWELL ROAD

City
CAMANO ISLAND

State
WA

Zip Code
98282-7089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328550

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOGAN, DORIS, , ,

Mailing Address 224 COUNTY ROAD 517

City
HANCEVILLE

State
AL

Zip Code
35077-3836

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.43

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328447

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JAMES, JERRY, , ,

Mailing Address 409-42 AVE.

City
GREELEY

State
CO

Zip Code
80634-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
O-I

Occupation (for Individual)
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.90

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328525

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JAMES, JERRY, , ,

Mailing Address 409-42 AVE.

City
GREELEY

State
CO

Zip Code
80634-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
O-I

Occupation (for Individual)
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

510.90

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328527

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KEYS, RICHRD, , ,

Mailing Address 145 E FOUNTAIN AVE

City
CINCINNATI

State
OH

Zip Code
45246-4540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328473

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOHLS, PATRICK, , ,

Mailing Address 39303 SHELburn DRIVE

City
SCIO

State
OR

Zip Code
97374-9558

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328595

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328450

Amount of Each Receipt this Period

22.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

297.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328453

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328454

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2022

Transaction ID : SA17.328456

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328457

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANDER, BENEDICT, , ,

Mailing Address 25676 MORALES

City
MISSION VIEJO

State
CA

Zip Code
92691-5820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328475

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LINDBERG, REGINALD, , ,

Mailing Address 260 PR 2219

City
DECATUR

State
TX

Zip Code
76234-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUPERIOR OSTRICH

Occupation (for Individual)
RANCHING OSTRICH

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328523

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCALLISTER, TERRY, , ,

Mailing Address 2100 STRATFORD PARK DRIVE

City
FORT WORTH

State
TX

Zip Code
76103-2633

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328479

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCANN, WILLIAM, , ,

Mailing Address 12909 EAST CASTRO STREET

City
DEWEY

State
AZ

Zip Code
86327-8285

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.05

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328497

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCARREY, DONNA, , ,

Mailing Address 4530 E 136TH

City
ANCHORAGE

State
AK

Zip Code
99516-4517

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.35

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328495

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEAGHER, STACY, , ,

Mailing Address 1 OAK HOLLOW CT.

City
YUBA CITY

State
CA

Zip Code
95991-6273

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328593

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUNDWILER, DENISE, , ,

Mailing Address 15332 SOUTH 180TH DRIVE

City
GOODYEAR

State
AZ

Zip Code
85338-5656

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328483

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURRAY, DONNA, , ,

Mailing Address 11 CHEDDAR CIRCLE

City
BELLA VISTA

State
AR

Zip Code
72715-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2022

Transaction ID : SA17.328518

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OESER, PATRICIA, , ,

Mailing Address 7527 GALOWAY

City
WICHITA

State
KS

Zip Code
67212-3119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACFC

Occupation (for Individual)
RECEPTIONIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328445

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OHLER, JOHN, , ,

Mailing Address 2589 SIBEL CIRCLE

City
LANSDALE

State
PA

Zip Code
19446-6078

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REMAX

Occupation (for Individual)
REALESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1036.05

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328485

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEUGHWADE, FRED, , ,

Mailing Address 1121 BEL MARIN KEYS BLVD

City
NOVATO

State
CA

Zip Code
94949-5306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.16

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328596

Amount of Each Receipt this Period

20.24

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RAYTHEON

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328442

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RAYTHEON

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328551

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RAYTHEON

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

796.55

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328562

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PORACH, BARBARA, , ,

Mailing Address 200 KINGFISHER WAY, COLONIAL HGTS,

City
COLONIAL HEIGHTS

State
VA

Zip Code
23834-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328528

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATER

State
FL

Zip Code
33764-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.85

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328567

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSS, ERROL, , ,

Mailing Address 43 RICHARD ST

City
FARMINGDALE

State
NY

Zip Code
11735-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARDSCRABBLE

Occupation (for Individual)
BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

602.50

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328470

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANDERS, MARGARET, , ,

Mailing Address 2070 N FELAND

City
FRESNO

State
CA

Zip Code
93722-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328438

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANSING, BETTY, , ,

Mailing Address 5599 HIGHWAY 70

City
CLARENDON

State
TX

Zip Code
79226-4004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1302.50

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328561

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328511

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328560

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328584

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

08 / **28** / **2022**

Transaction ID : SA17.328586

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TOMASIK, LORI, , ,

Mailing Address 157 RESERVOIR ROAD

City
PARSIPPANY

State
NJ

Zip Code
07054-1379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DANMAR

Occupation (for Individual)
ADMN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.10

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328488

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VON BON, JOHN, , ,

Mailing Address W173N10234 WOODBRIDGE LANE

City
GERMANTOWN

State
WI

Zip Code
53022-4685

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.65

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328509

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328579

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITEMAN, KEITH, , ,

Mailing Address 2671 DAISY LANE

City
FALLBROOK

State
CA

Zip Code
92028-9591

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.20

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328468

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, OHLAND, , ,

Mailing Address 1706 E. KYLE ROAD

City
CLUTE

State
TX

Zip Code
77531-3413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.20

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328463

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILSON, ADDISON, , ,

Mailing Address 1700 SUNSET BOULEVARD

City
WEST COLUMBIA

State
SC

Zip Code
29169-5940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US CONGRESS

Occupation (for Individual)
MEMBER OF CONGRESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 28 / 2022

Transaction ID : SA17.328531

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AMYX, PATRICIA, , ,

Mailing Address 4382 NORTH ROSEPOINT AVENUE

City
MERIDIAN

State
ID

Zip Code
83646-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.350397

Amount of Each Receipt this Period

- 0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AMYX, PATRICIA, , ,

Mailing Address 4382 NORTH ROSEPOINT AVENUE

City
MERIDIAN

State
ID

Zip Code
83646-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.350454

Amount of Each Receipt this Period

- 18.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.350445

Amount of Each Receipt this Period

- 1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

- 19.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.350446

Amount of Each Receipt this Period

- 1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.350447

Amount of Each Receipt this Period

- 1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.350448

Amount of Each Receipt this Period

- 1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

- 3.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.350449

Amount of Each Receipt this Period

- 1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.350484

Amount of Each Receipt this Period

- 5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.350485

Amount of Each Receipt this Period

- 5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

- 11.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAWLES, JAMES, WHITE, ,

Mailing Address 1205 NORTH BAY SHORE DRIVE

City
VIRGINIA BEACH

State
VA

Zip Code
23451-3714

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328597

Amount of Each Receipt this Period

7000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWAB, HELEN, , ,

Mailing Address PO BOX 192861

City
SAN FRANCISCO

State
CA

Zip Code
94119-2861

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328598

Amount of Each Receipt this Period

1000000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328599

Amount of Each Receipt this Period

906.59

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1007000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AVANT, WILLIAM, , ,

Mailing Address 279VILLAGER DR

City

SAINT SIMONS ISLAN

State

GA

Zip Code

31522-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.328972

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City

SARASOTA

State

FL

Zip Code

34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329038

Amount of Each Receipt this Period

1.80

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City

SARASOTA

State

FL

Zip Code

34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329040

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329041

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328813

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328815

Amount of Each Receipt this Period

0.60

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

1.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328816

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328817

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BERSAGLIERI, RONALD, , ,

Mailing Address 6783 CHELTON DRIVE

City
OAKLAND

State
CA

Zip Code
94611-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

251.35

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329002

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328723

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328724

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

509.50

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328725

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 206 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328727

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328729

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

509.50

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328731

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURKHOLDER, DONNA, , ,

Mailing Address 14747 MARINE ROAD

City
MONTROSE

State
CO

Zip Code
81403-8314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329033

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CALES, NANCY, , ,

Mailing Address P.O. BOX 502

City
GLEN SAINT MARY

State
FL

Zip Code
32040-0502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.328986

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329015

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329017

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329018

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329043

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329044

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329045

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOS SANTOS, MARGARET, , ,

Mailing Address 10 FRANKLIN AVENUE

City
MAPLEWOODState
NJZip Code
07040-2919FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEANECK COMMUNITY CHARTER SCHOOLOccupation (for Individual)
INSTRUCTIONAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329063

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EARL, NORA, , ,

Mailing Address 226 ALEXANDRIA PLACE DRIVE

City
APOPKAState
FLZip Code
32712-4872FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329003

Amount of Each Receipt this Period

0.60

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDS, JAMES, , ,

Mailing Address 981 U.S. HIGHWAY 60

City
BARTLESVILLEState
OKZip Code
74003-4245FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328885

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329073

Amount of Each Receipt this Period

0.07

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.17

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.328923

Amount of Each Receipt this Period

0.18

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYES, BRUCE, , ,

Mailing Address 126 ANDOVER LN

City
HUNTSVILLE

State
AL

Zip Code
35811-8630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329005

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JAMES, GLORIA, , ,

Mailing Address 4673 PIERSON DRIVE

City
OOLTEWAH

State
TN

Zip Code
37363-8881

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

281.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.328761

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LITTLEJOHN, JOHN, , ,

Mailing Address P.O. BOX 276

City
MOORESVILLE

State
IN

Zip Code
46158-0276

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.85

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.328949

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.328889

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDIN

State
FL

Zip Code
34698-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329117

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NEWBERRY, KAY, , ,

Mailing Address 5517 65 TH STREET

City
LUBBOCKState
TXZip Code
79424-1230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328606

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEWBERRY, KAY, , ,

Mailing Address 5517 65 TH STREET

City
LUBBOCKState
TXZip Code
79424-1230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328607

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWBERRY, KAY, , ,

Mailing Address 5517 65 TH STREET

City
LUBBOCKState
TXZip Code
79424-1230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

217.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328608

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

20.35

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PARTRIDGE, LINDA, , ,

Mailing Address 120 OFALLON PLAZA

City
O FALLON

State
MO

Zip Code
63366-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARTRIDGE COUNSELING

Occupation (for Individual)
COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.67

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328965

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEARSON, LEONARD, , ,

Mailing Address 579 VINA ROSE DRIVE

City
PETALUMA

State
CA

Zip Code
94954-1311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.40

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328859

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLSTEIN, CAROLE, , ,

Mailing Address 863 STRATHMORE DR.

City
ORLANDO

State
FL

Zip Code
32803-6941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

307.10

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.328991

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COAST

State
FL

Zip Code
32137-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329071

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.328934

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.328708

Amount of Each Receipt this Period

0.07

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIERNEY, MATTHEW, , ,

Mailing Address 401 RED CEDAR COURT

City
NASHVILLEState
TNZip Code
37214-4023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328827

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOODState
NYZip Code
11731-4832FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328992

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITYState
FLZip Code
33868-5113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

636.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.328970

Amount of Each Receipt this Period

0.15

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.50

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLEState
MIZip Code
49418-2259FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2022

Transaction ID : SA17.328946

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2022

Transaction ID : SA17.329121

Amount of Each Receipt this Period

15339.83

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTIState
MIZip Code
48197-1738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2022

Transaction ID : SA17.329235

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

30.20

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329596

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329597

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDRIKIDES, CAROL, , ,

Mailing Address 19450 PIERSON DRIVE

City
NORTHVILLE

State
MI

Zip Code
48167-2639

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329488

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

45.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDRIKIDES, CAROL, , ,

Mailing Address 19450 PIERSON DRIVE

City
NORTHVILLE

State
MI

Zip Code
48167-2639

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329501

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARMSTRONG, ERNESTINE, , ,

Mailing Address 4152 LAWHON CT,

City
TUCKER

State
GA

Zip Code
30084-6452

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329552

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARMSTRONG, ERNESTINE, , ,

Mailing Address 4152 LAWHON CT,

City
TUCKER

State
GA

Zip Code
30084-6452

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

327.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329616

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ATWELL, DARRYL, , ,

Mailing Address 218 STABLE WAY

City
NICHOLASVILLEState
KYZip Code
40356-8046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
08	29	2022

Transaction ID : SA17.329548

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAKER, RUDY, , ,

Mailing Address 1016 SWIFT CREEK DRIVE

City
CLAYTONState
NCZip Code
27520-9737FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.20

Date of Receipt

M M	D D	Y Y Y Y Y Y
08	29	2022

Transaction ID : SA17.329477

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARBER, DANIEL, , ,

Mailing Address 259 SANTA BARBARA

City
PALM DESERTState
CAZip Code
92260-2155FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
08	29	2022

Transaction ID : SA17.329478

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BASTOUNES, ATHANASIA CINDY, , ,

Mailing Address 1005 BUTTERNUT LANE

City
MOUNT PROSPECT

State
IL

Zip Code
60056-6357

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MIGHTY CAKE COMPANY

Occupation (for Individual)
BAKERY SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.35

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329244

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BASTOUNES, ATHANASIA CINDY, , ,

Mailing Address 1005 BUTTERNUT LANE

City
MOUNT PROSPECT

State
IL

Zip Code
60056-6357

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MIGHTY CAKE COMPANY

Occupation (for Individual)
BAKERY SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.35

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329245

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEAN, KENNETH, , ,

Mailing Address 950 BROADWAY

City
BANGOR

State
PA

Zip Code
18013-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.50

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329496

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLE

State
MD

Zip Code
21234-3393

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329577

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLE

State
MD

Zip Code
21234-3393

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329578

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLE

State
MD

Zip Code
21234-3393

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329580

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLE

State
MD

Zip Code
21234-3393

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.25

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329581

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLE

State
MD

Zip Code
21234-3393

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.25

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329584

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENSON, JUDITH, , ,

Mailing Address 7550 HILLSIDE DRIVE

City
LA JOLLA

State
CA

Zip Code
92037-3940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329275

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1025.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOLINGER, REBA, , ,

Mailing Address 543 W 6TH ST

City
LITITZ

State
PA

Zip Code
17543-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.70

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329195

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOLINGER, REBA, , ,

Mailing Address 543 W 6TH ST

City
LITITZ

State
PA

Zip Code
17543-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.70

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329198

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329484

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329561

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329395

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329396

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERS

State
OR

Zip Code
97759-8000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329570

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERS

State
OR

Zip Code
97759-8000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329571

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRACHFELD, DONALD, , ,

Mailing Address 25 FOUR SEASONS DRIVE

City
NORTH CALDWELL

State
NJ

Zip Code
07006-6134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

811.35

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329563

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRADEN, ANNETTE, , ,

Mailing Address 10710 MIRASOL DRIVE. BLDG.701

City
MIROMAR LAKES

State
FL

Zip Code
33913-7842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329588

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRADEN, TERRY, , ,

Mailing Address 1313 LELAND DRIVE

City
SUN CITY CENTER

State
FL

Zip Code
33573-6376

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329511

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, ELLEN, , ,

Mailing Address P.O. BOX 2156

City
SILSBEE

State
TX

Zip Code
77656-2156

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329269

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

180.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTONState
OHZip Code
45383-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329169

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRYANT, JUDITH, , ,

Mailing Address 28 WOOD AVE.

City
CONCORDState
NHZip Code
03301-2731FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329189

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAMPBELL, DR RICK, , ,

Mailing Address P.O. BOX 680055

City
PARK CITYState
UTZip Code
84068-0055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329204

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1020.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMANState
SCZip Code
29349-5600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329241

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, CHRISTOPHER W, , ,

Mailing Address 103 SOUTH GALA COURT

City
BONAIREState
GAZip Code
31005-4033FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329345

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COHEN, BRADLEY, , ,

Mailing Address 1120 HOLLY AVENUE

City
COTTAGE GROVEState
ORZip Code
97424-1319FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COTTAGE GROVE CHEVROLETOccupation (for Individual)
NEW VEHICLE AUTO DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329143

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CORY, JAY, , ,

Mailing Address 435 WILLOW VISTA DRIVE

City
EL LAGO

State
TX

Zip Code
77586-6019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.12

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329199

Amount of Each Receipt this Period

8.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CORY, JAY, , ,

Mailing Address 435 WILLOW VISTA DRIVE

City
EL LAGO

State
TX

Zip Code
77586-6019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.12

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329541

Amount of Each Receipt this Period

8.29

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DACORTE, TRINIDAD, , ,

Mailing Address 3231 ROCK CREEK RUN

City
SAN ANTONIO

State
TX

Zip Code
78230-3835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
HEALTH CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

306.65

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329191

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.29

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 231 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DANIELLE, JOSEPH, , ,

Mailing Address 11866 KESWICK

City
WEST PALM BEACH

State
FL

Zip Code
33412-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329390

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVENPORT, PAUL, , ,

Mailing Address 124 ALDERSGATE DR.

City
JACKSONVILLE

State
NC

Zip Code
28546-5847

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.70

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329384

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DENDY, PHYLLIS, , ,

Mailing Address 1808 N. AVENUE H

City
HASKELL

State
TX

Zip Code
79521-3018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.70

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329165

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DENDY, PHYLLIS, , ,

Mailing Address 1808 N. AVENUE H

City
HASKELLState
TXZip Code
79521-3018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329172

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DENDY, PHYLLIS, , ,

Mailing Address 1808 N. AVENUE H

City
HASKELLState
TXZip Code
79521-3018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329618

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIERLAM, MARK, , ,

Mailing Address 7737 LAKERIDGE LOOP

City
MONTGOMERYState
ALZip Code
36117-7423FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329190

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

110.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DRUCE, LARRY, , ,

Mailing Address 4001 SOUTH MONTAIA DRIVE

City
WEST VALLEY CITYState
UTZip Code
84119-4822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329131

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGEState
NJZip Code
08514-2515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329594

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329211

Amount of Each Receipt this Period

6.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

261.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329212

Amount of Each Receipt this Period

3.75

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329214

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329216

Amount of Each Receipt this Period

18.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

27.25

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FANKHANEL, PAMELA, , ,

Mailing Address 12216 IRVINE AVENUE NORTHWEST

City
BEMIDJIState
MNZip Code
56601-7106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.80

Date of Receipt

M M	D D	Y Y Y Y
08	29	2022

Transaction ID : SA17.329606

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FARRELL, HOLLY, , ,

Mailing Address 6329 MONTROSE DR.

City
DALLASState
TXZip Code
75209-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.50

Date of Receipt

M M	D D	Y Y Y Y
08	29	2022

Transaction ID : SA17.329568

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARRELL, ROBERT, , ,

Mailing Address 651 BERING, 403

City
HOUSTONState
TXZip Code
77057-2100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
OIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M	D D	Y Y Y Y
08	29	2022

Transaction ID : SA17.329333

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FARRELL, ROBERT, , ,

Mailing Address 651 BERING, 403

City
HOUSTONState
TXZip Code
77057-2100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
OIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329335

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FAUCETT, EVE, , ,

Mailing Address 3410 CAMINITO DANIELLA

City
DEL MARState
CAZip Code
92014-4112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UN BACIOOccupation (for Individual)
MEN AND WOMANS CLOTHING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329479

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLYNN, DAN JOAN, , ,

Mailing Address 17421 N FLICKER AV

City
NAMPAState
IDZip Code
83687-4835FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329404

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FORBES, GRAHAM, , ,

Mailing Address 300 S VAL VISTA DV #266 COTTONWOOD

City
MESAState
AZZip Code
85204-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329134

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FORBES, GRAHAM, , ,

Mailing Address 300 S VAL VISTA DV #266 COTTONWOOD

City
MESAState
AZZip Code
85204-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329135

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FORBES, GRAHAM, , ,

Mailing Address 300 S VAL VISTA DV #266 COTTONWOOD

City
MESAState
AZZip Code
85204-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

261.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329137

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

20.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FORBES, GRAHAM, , ,

Mailing Address 300 S VAL VISTA DV #266 COTTONWOOD

City
MESA

State
AZ

Zip Code
85204-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.45

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329138

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FORBES, GRAHAM, , ,

Mailing Address 300 S VAL VISTA DV #266 COTTONWOOD

City
MESA

State
AZ

Zip Code
85204-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.45

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329141

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FORBES, GRAHAM, , ,

Mailing Address 300 S VAL VISTA DV #266 COTTONWOOD

City
MESA

State
AZ

Zip Code
85204-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

261.45

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329142

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FOWLER, PAUL, , ,

Mailing Address 5972 PONY EXPRESS TRAIL

City
POLLOCK PINES

State
CA

Zip Code
95726-9778

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329505

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRECHE, NORMA, , ,

Mailing Address 7861 LINDEN COURT

City
NAPLES

State
FL

Zip Code
34113-3201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329544

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRY, BARBARA, , ,

Mailing Address 2397 NILES FERRY ROAD

City
MADISONVILLE

State
TN

Zip Code
37354-6337

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

307.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329234

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

48.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRY, BARBARA, , ,

Mailing Address 2397 NILES FERRY ROAD

City
MADISONVILLE

State
TN

Zip Code
37354-6337

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.35

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329236

Amount of Each Receipt this Period

12.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GATTI, PATRICIA, , ,

Mailing Address 1706 EAST 52ND STREET

City
BROOKLYN

State
NY

Zip Code
11234-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.87

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329308

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GATTI, PATRICIA, , ,

Mailing Address 1706 EAST 52ND STREET

City
BROOKLYN

State
NY

Zip Code
11234-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1320.87

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329315

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACHState
FLZip Code
33408-1952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329455

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACHState
FLZip Code
33408-1952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329456

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329171

Amount of Each Receipt this Period

6.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

66.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329262

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESECKE, RICHARD, , ,

Mailing Address 1807 HWY281 STE 4

City
MARBLE FALLS

State
TX

Zip Code
78654-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329576

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, ROBERT, , ,

Mailing Address 20570 FORTUNA DEL SUR

City
ESCONDIDO

State
CA

Zip Code
92029-4506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

654.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329332

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 243 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GREEN, RONALD, , ,

Mailing Address N12285 TAYLOR LAKE ROAD

City
MINONG

State
WI

Zip Code
54859-9119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329481

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329284

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

608.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329287

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 244 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City
LAKE PANASOFFKEE

State
FL

Zip Code
33538-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329482

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARDT, THOMAS, , ,

Mailing Address 135 WHISTLING DUCK LANE

City
LEWISVILLE

State
TX

Zip Code
75077-8283

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329468

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARDT, THOMAS, , ,

Mailing Address 135 WHISTLING DUCK LANE

City
LEWISVILLE

State
TX

Zip Code
75077-8283

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

483.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329469

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

52.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONT

State
IL

Zip Code
61568-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329322

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, KATHLEEN, , ,

Mailing Address 12900 CAMINO DEL VALLE

City
POWAY

State
CA

Zip Code
92064-1814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329326

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLBEN, MELVIN, , ,

Mailing Address 407 KATIELEE COVE, DALLAS, GA 3013

City
DALLAS

State
GA

Zip Code
13032-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329316

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

85.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOWARD, MARILYN, , ,

Mailing Address 36359 SOUTH WIND CREST DRIVE

City
TUCSON

State
AZ

Zip Code
85739-1698

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.35

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329619

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329554

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. IVES, HOWARD, , ,

Mailing Address 4601 E DESERT COVE AVE

City
PHOENIX

State
AZ

Zip Code
85028-3028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329514

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACOBS, WARREN, , ,

Mailing Address 7684 CHANTELE LANE

City
ROSCOE

State
IL

Zip Code
61073-9768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.07

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329321

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, CRAIG, , ,

Mailing Address 1070 WINDY SHORE DRIVE

City
COLDWATER

State
MI

Zip Code
49036-8024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.05

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329342

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, CRAIG, , ,

Mailing Address 1070 WINDY SHORE DRIVE

City
COLDWATER

State
MI

Zip Code
49036-8024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.05

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329343

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KASPARECK, MARION, , ,

Mailing Address 17 EAST SHELL WAY

City
LAVALLETTEState
NJZip Code
08735-1830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329136

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329152

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329153

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329154

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329155

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOTLOFF, RONALD, , ,

Mailing Address 167 LUNETTA LANE

City
RANCHO MISSION VIE

State
CA

Zip Code
92694-1596

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329560

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KRIBS, LEONARD, , ,

Mailing Address 2314 ASHLAND STREET

City
HOUSTON

State
TX

Zip Code
77008-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329318

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LACKETT, JEAN, , ,

Mailing Address 2522 APPLEWOOD DRIVE

City
FREEHOLD

State
NJ

Zip Code
07728-3983

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329457

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LACKETT, JEAN, , ,

Mailing Address 2522 APPLEWOOD DRIVE

City
FREEHOLD

State
NJ

Zip Code
07728-3983

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329459

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **LANG, RICHARD, , ,**

Mailing Address 719 15TH AVE E

City
SEATTLE

State
WA

Zip Code
98112-4525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.93

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329178

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **LANKFORD, KEITH, , ,**

Mailing Address 5309 REVERE ROAD

City
DURHAM

State
NC

Zip Code
27713-2540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WAKECOUNTY

Occupation (for Individual)
PLANNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329201

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **LEONARD, ANNE, , ,**

Mailing Address 13202 HUNTERS SPRING

City
SAN ANTONIO

State
TX

Zip Code
78230-2862

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AHA

Occupation (for Individual)
SMA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329197

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

67.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEONARD, LUANNE, , ,

Mailing Address 36560 SAGUARO COURT

City
RANCHO MIRAGE

State
CA

Zip Code
92270-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1404.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329609

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEONARD, LUANNE, , ,

Mailing Address 36560 SAGUARO COURT

City
RANCHO MIRAGE

State
CA

Zip Code
92270-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1404.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329610

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LINDEMANN, ROSEMARY, , ,

Mailing Address 815 RED STABLE WAY

City
OAK BROOK

State
IL

Zip Code
60523-2670

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329349

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

435.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOUIE, WINDSOR, , ,

Mailing Address P.O. BOX 1364

City
TUSTIN

State
CA

Zip Code
92781-1364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329139

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAHER, PEGGY, , ,

Mailing Address 5685 SW 60TH STREET

City
OCALA

State
FL

Zip Code
34474-7671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.25

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329491

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MALVICH, LINDA, , ,

Mailing Address BOX 156

City
HOLLY

State
MI

Zip Code
48442-0156

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

401.35

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329193

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MALVICH, LINDA, , ,

Mailing Address BOX 156

City
HOLLYState
MIZip Code
48442-0156FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329374

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARQUEZ, HORACIO, , ,

Mailing Address P.O. BOX 914

City
MCLEANState
VAZip Code
22101-0914FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329229

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCALEARNEY, PHIL, , ,

Mailing Address 602 LAKESHORE DR.

City
HANNA CITYState
ILZip Code
61536-9520FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329598

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 255 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCDONALD, JESSE, , ,

Mailing Address 108 SEVILLE PL

City
STARKVILLEState
MSZip Code
39759-2132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329424

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEROLA, KAREN, , ,

Mailing Address 8615 MARIA COURT

City
HOWELLState
MIZip Code
48855-6301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STC INTERNATIONALOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329489

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILES, LAHOMA, , ,

Mailing Address 10220 SPRUCE DRIVE

City
GOODMANState
MOZip Code
64843-9168FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

247.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329184

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

165.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, ANNAMAY, , ,

Mailing Address 732 VILLITA LANE

City
LADY LAKEState
FLZip Code
32159-9128FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329327

Amount of Each Receipt this Period

505.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACHState
FLZip Code
32168-7940FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329460

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, DAVE, , ,

Mailing Address 1958 KIRBY RD.

City
LEBANONState
OHZip Code
45036-9166FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329444

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

560.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOK, LIMING, , ,

Mailing Address 29726 COJAK CIRCLE

City
BOERNEState
TXZip Code
78015-4521FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329575

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORTON, HUGH, , ,

Mailing Address 626 SAPLIN BRANCH RD

City
TIMBERLAKEState
NCZip Code
27583-9027FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DH APPLIANCEOccupation (for Individual)
REPAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329301

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORTON, HUGH, , ,

Mailing Address 626 SAPLIN BRANCH RD

City
TIMBERLAKEState
NCZip Code
27583-9027FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DH APPLIANCEOccupation (for Individual)
REPAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329304

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 258 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURRAY, EVAN, , ,

Mailing Address 6605 QUAIL HOLLOW RD., #345

City
MEMPHISState
TNZip Code
38120-1337FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.60

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329555

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURRAY, EVAN, , ,

Mailing Address 6605 QUAIL HOLLOW RD., #345

City
MEMPHISState
TNZip Code
38120-1337FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.60

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329557

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURRAY, RICHARD, , ,

Mailing Address 648 EAST STARK DRIVE

City
PALATINEState
ILZip Code
60074-3800FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.35

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329535

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUSMECI, NICHOLAS, , ,

Mailing Address 102 DOGWOOD DR.

City
LULINGState
LAZip Code
70070-3231FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ENTERGY SERVICES, INCOccupation (for Individual)
ELECTRICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329498

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NIEUWOLD, HANS, , ,

Mailing Address 103 GOLFVIEW DRIVE

City
GEORGETOWNState
TXZip Code
78633-4826FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329573

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLSEN, WILLIAM, , ,

Mailing Address 8796 CEDAR HAMMOCK BLVD

City
NAPLESState
FLZip Code
34112-3302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329519

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

180.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 260 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLSEN, WILLIAM, , ,

Mailing Address 8796 CEDAR HAMMOCK BLVD

City
NAPLESState
FLZip Code
34112-3302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329520

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PLATT, MICHAEL, , ,

Mailing Address 30 BLACK ROCK CT

City
OXFORDState
GAZip Code
30054-2646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329163

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEONOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329170

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLSTEIN, CAROLE, , ,

Mailing Address 863 STRATHMORE DR.

City
ORLANDOState
FLZip Code
32803-6941FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329436

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POZZI, ROBERT, , ,

Mailing Address 3733 FALSTONE ROAD

City
NORTH CHESTERFIELDState
VAZip Code
23234-3769FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329255

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASMUSSEN, LEE, , ,

Mailing Address 1626 W ROXBURY PL

City
LITTLETONState
COZip Code
80122-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329547

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 262 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROHR, ROGER, , ,

Mailing Address 6940 ROCHESTER ROAD

City
EAST ROCHESTER

State
OH

Zip Code
44625-9402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329386

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SABADIE, CARLOS, , ,

Mailing Address 1641 VELA COVE

City
SLIDELL

State
LA

Zip Code
70458-6219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.85

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329440

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANDERSON, GALE, , ,

Mailing Address 1113 LUCILLE CT.

City
RIDGECREST

State
CA

Zip Code
93555-5901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329125

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)
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for each category of the
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANDSTROM, JOHN, , ,

Mailing Address 17101 408TH ST. SW.

City
PLAZAState
NDZip Code
58771-9691FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022**Transaction ID : SA17.329266**

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANDSTROM, JOHN, , ,

Mailing Address 17101 408TH ST. SW.

City
PLAZAState
NDZip Code
58771-9691FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022**Transaction ID : SA17.329267**

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANTOSUOSSO, JOSEPH, , ,

Mailing Address 13615 209TH AVE NE

City
WOODINVILLEState
WAZip Code
98077-7600FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
CASCADE CONSOLIDATED INDUSTRIESOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022**Transaction ID : SA17.329257**

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

425.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAPP, MARY, , ,

Mailing Address 1305 BERON DR.

City
METAIRIE

State
LA

Zip Code
70003-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.05

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329246

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKON

State
OK

Zip Code
73099-5781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.10

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329179

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKON

State
OK

Zip Code
73099-5781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

579.10

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329181

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHOOK, JOHN L, , ,

Mailing Address 927 CHELTENHAM WAY

City
AVONState
INZip Code
46123-4139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
L.H. EXPRESS, LLCOccupation (for Individual)
DIRECTOR OF SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329225

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SKEWES, ANNE, , ,

Mailing Address 14409 ISLEVIEW DR.

City
WINTER GARDENState
FLZip Code
34787-6203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329591

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, KENNETH, , ,

Mailing Address 9225 EAST TANQUE VERDE ROAD, APT 4

City
TUCSONState
AZZip Code
85749-7796FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

298.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329433

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, RANDY, , ,

Mailing Address 1305 WEST SHAW

City
CARLSBAD

State
NM

Zip Code
88220-4235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329430

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPIEGL, PETER, , ,

Mailing Address W7106 PULS FARM PLACE

City
GREENVILLE

State
WI

Zip Code
54942-9501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.30

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329258

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

685.17

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329394

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329509

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSING

State
ID

Zip Code
83639-5511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329592

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STONER, WILLIAM, , ,

Mailing Address 13314 AUTUMN VALLEY DR.

City
CYPRESS

State
TX

Zip Code
77429-3583

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

498.90

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329397

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SWANN, REBECCA, , ,

Mailing Address 1415 OAK STREET

City
WILMINGTON

State
DE

Zip Code
19805-4226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
MUSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329215

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWANN, REBECCA, , ,

Mailing Address 1415 OAK STREET

City
WILMINGTON

State
DE

Zip Code
19805-4226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
MUSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329217

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWANN, REBECCA, , ,

Mailing Address 1415 OAK STREET

City
WILMINGTON

State
DE

Zip Code
19805-4226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
MUSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329218

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAYLOR, DAVID, , ,

Mailing Address 145 WHITEHALL ROAD

City
ARAPAHOE

State
NC

Zip Code
28510-9513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329243

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.34

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329285

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329278

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329280

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329286

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329288

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329292

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIDD, JUDY, , ,

Mailing Address 79 PEARL DRIVE

City
HILLSBORO

State
MO

Zip Code
63050-5032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329297

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TINKER, BRUCE, , ,

Mailing Address 1155 MARKS COURT

City
DINUBA

State
CA

Zip Code
93618-3172

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329226

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 272 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TODD, THOMAS, , ,

Mailing Address 504 SHERWOOD DR.

City
VICTORIAState
TXZip Code
77901-4532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329307

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLEState
FLZip Code
33772-2660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329368

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATSON, KRIS, , ,

Mailing Address 488 W CALLE CAJETA

City
SAHUARITAState
AZZip Code
85629-7855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

VA HOSPITAL

Occupation (for Individual)

RESPIRATORY THERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

Transaction ID : SA17.329508

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 273 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEHMAN, JOAN, , ,

Mailing Address 831 HICKORY KNOB CIRCLE

City
CEDAR HILL

State
TX

Zip Code
75104-7803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329320

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAK

State
AK

Zip Code
99567-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329129

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILKEN, MARVIN, , ,

Mailing Address 3540 BEEKMAN DR.

City
KELLER

State
TX

Zip Code
76244-5128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2022

Transaction ID : SA17.329124

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITY

State
FL

Zip Code
33868-5113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.85

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329295

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITY

State
FL

Zip Code
33868-5113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.85

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329586

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLINGS, WILLIAM, , ,

Mailing Address 90097 SPIRES LANE EUGENE

City
EUGENE

State
OR

Zip Code
97402-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

08 / 29 / 2022

Transaction ID : SA17.329620

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 275 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILSON, MARILYN R, , ,

Mailing Address P.O. BOX 235

City
HAINES

State
AK

Zip Code
99827-0235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329340

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINKLER, DONALD, , ,

Mailing Address 13703 SE LOST LITTLE DR.

City
PRINEVILLE

State
OR

Zip Code
97754-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.45

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329533

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WONG, RONALD, , ,

Mailing Address 355 CAMPUS DRIVE

City
HANFORD

State
CA

Zip Code
93230-4310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329187

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 276 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YINGLING, BILL, , ,

Mailing Address 2308 PACIFIC DRIVE

City
NEWPORT BEACH

State
CA

Zip Code
92625-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329140

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZAREMBO, CATHERINE, , ,

Mailing Address 49 WHITMAN ROAD

City
MADISON

State
CT

Zip Code
06443-1885

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329317

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZELLNER, C., , ,

Mailing Address 150 S. HWY 160, STE 8 #287

City
PAHRUMP

State
NV

Zip Code
89048-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / **29** / **2022**

Transaction ID : SA17.329347

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLEXPPOINT MEDIA INC.

Mailing Address PO BOX 1051

City
NEW ALBANY

State
OH

Zip Code
43054

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1129.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.001

Amount of Each Receipt this Period

1129.30

☐ Memo Item

MEDIA REFUND

NON-CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330364

Amount of Each Receipt this Period

1448.49

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ABBE, ROSS, , ,

Mailing Address 2721 VICTOR ST

City
BELLINGHAM

State
WA

Zip Code
98225-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

SELF EMPLOYED

INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

927.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330368

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1164.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331158

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331162

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331163

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331164

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331165

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLE

State
IL

Zip Code
60532-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330452

Amount of Each Receipt this Period

6.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLEState
ILZip Code
60532-3219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330453

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLEState
ILZip Code
60532-3219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330454

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330410

Amount of Each Receipt this Period

0.40

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

50.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330412

Amount of Each Receipt this Period

0.60

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330413

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330414

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330416

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330417

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330479

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330480

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331175

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331179

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 284 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.330516

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.330705

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, JIM, , ,

Mailing Address 3230 POSSUM RUN ROAD

City
MANSFIELD

State
OH

Zip Code
44903-7520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

243.62

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.330590

Amount of Each Receipt this Period

0.12

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.57

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLES, DAVE, , ,

Mailing Address 8673 WEST FAWN BROOK STREET

City
BOISE

State
ID

Zip Code
83714-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6140.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330607

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLES, DAVE, , ,

Mailing Address 8673 WEST FAWN BROOK STREET

City
BOISE

State
ID

Zip Code
83714-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6140.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330650

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLES, DAVE, , ,

Mailing Address 8673 WEST FAWN BROOK STREET

City
BOISE

State
ID

Zip Code
83714-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

6140.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330652

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COURSON, CARL, , ,

Mailing Address 900 N E 3RD STREET

City
BELLE GLADE

State
FL

Zip Code
33430-2042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BIG LAKE SNACK SALES, INC

Occupation (for Individual)
V PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330982

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, CYNTHIA, , ,

Mailing Address 32764 RIDGE TOP LANE

City
CASTAIC

State
CA

Zip Code
91384-3082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330840

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGE

State
NJ

Zip Code
08514-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

447.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331168

Amount of Each Receipt this Period

0.08

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.53

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLSWORTH, CLARENCE, , ,

Mailing Address 8059 NORTH HIBISCUS LANE

City
COEUR D ALENE

State
ID

Zip Code
83815-0081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330753

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIFIELD, MARY ALICE, , ,

Mailing Address 3008 CAMBRIDGE CT

City
TEMPLE

State
TX

Zip Code
76502-7137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331110

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330424

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330427

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330437

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330438

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330440

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUERRERO, ESTRELLA, , ,

Mailing Address 3404 LAKE PARK AVENUE

City
FALLBROOK

State
CA

Zip Code
92028-7852

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.55

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330451

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330441

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330443

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330761

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAYES, BRUCE, , ,

Mailing Address 126 ANDOVER LN

City
HUNTSVILLE

State
AL

Zip Code
35811-8630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

363.70

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331098

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLMES, THERESA, , ,

Mailing Address PAO BOX 2723

City
SHALLOTTE

State
NC

Zip Code
28459-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRITE PROPERTIES

Occupation (for Individual)
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.25

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330577

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWINGTON, RICHARD, , ,

Mailing Address 3443 JAMESON LN.

City
WINSTON SALEM

State
NC

Zip Code
27106-4772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.35

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331026

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, LENORA, , ,

Mailing Address 5510 WINDSOR ISLAND RD N UNIT #16

City
KEIZER

State
OR

Zip Code
97303-6152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOME INSTEAD SENIOR CARE

Occupation (for Individual)
CAREGIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

333.45

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330626

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KINCL, LOUIS, , ,

Mailing Address 303 WINSOR COURT

City
BROOKELAND

State
TX

Zip Code
75931-5692

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1017.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330603

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330507

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

486.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330508

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHURState
LAZip Code
70663-2809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330510

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHURState
LAZip Code
70663-2809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330511

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHURState
LAZip Code
70663-2809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

486.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330512

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

4.05

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330513

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LACKEY, ANN, , ,

Mailing Address 1117 SPRUCE ST

City
LAKE OSWEGO

State
OR

Zip Code
97034-6153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.91

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330800

Amount of Each Receipt this Period

1.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNA

State
MN

Zip Code
55060-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.85

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330533

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNA

State
MN

Zip Code
55060-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330534

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOFARO, MICHAEL, , ,

Mailing Address 58 CANDLEWOOD LAKE ROAD

City

BROOKFIELD

State

CT

Zip Code

06804-2504

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IBM

Occupation (for Individual)
RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330554

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOUIE, WINDSOR, , ,

Mailing Address P.O. BOX 1364

City

TUSTIN

State

CA

Zip Code

92781-1364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330765

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MALVICH, LINDA, , ,

Mailing Address BOX 156

City
HOLLY

State
MI

Zip Code
48442-0156

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.35

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331180

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORAN, FRANK, , ,

Mailing Address P.O. BOX 4848

City

SHREVEPORT

State

LA

Zip Code

71134-0848

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.65

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330990

Amount of Each Receipt this Period

0.10

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORRISON, BESSIE, , ,

Mailing Address 3120 , LEWIS RD.

City

COLUMBUS

State

OH

Zip Code

43207-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.10

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330811

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUELLER, CHRISTINE, , ,

Mailing Address 1743 BOULDER DR.

City
DARIENState
ILZip Code
60561-5922FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330619

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUELLER, CHRISTINE, , ,

Mailing Address 1743 BOULDER DR.

City
DARIENState
ILZip Code
60561-5922FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330620

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUELLER, CHRISTINE, , ,

Mailing Address 1743 BOULDER DR.

City
DARIENState
ILZip Code
60561-5922FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

302.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330621

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

10.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331109

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331111

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331112

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331113

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331114

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331115

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'DONNELL, DONNA, , ,

Mailing Address P.O. BOX 1132

City
BOYD

State
TX

Zip Code
76023-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.05

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331116

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSTER, MARLENE, , ,

Mailing Address 2859 DAISYBROOK ST NW

City

NORTH CANTON

State

OH

Zip Code

44720-8168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OSTER ENTERPRISES

Occupation (for Individual)
OFFICE MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.02

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331176

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City

FLEMING

State

OH

Zip Code

45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

413.40

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330561

Amount of Each Receipt this Period

1.80

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

2.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330563

Amount of Each Receipt this Period

1.60

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330565

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REVETT, ELENA, , ,

Mailing Address 1606 ABACO DR., C3

City
COCONUT CREEK

State
FL

Zip Code
33066-1448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.330566

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBERTS, GARY, , ,

Mailing Address 6206 APPIAN WAY

City
RIVERSIDE

State
CA

Zip Code
92506-4555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.35

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.330633

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROE, LARRY, , ,

Mailing Address 405 LAKESHORE DR.

City
LEXINGTON

State
KY

Zip Code
40502-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.15

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.330539

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTON

State
WA

Zip Code
98058-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.330371

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTER

State
PA

Zip Code
17601-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330606

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPAETH PHD, EDMUND, , ,

Mailing Address 26536 LOVE LANE

City
RAMONA

State
CA

Zip Code
92065-4822

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330882

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSING

State
ID

Zip Code
83639-5511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

541.37

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330598

Amount of Each Receipt this Period

0.06

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STERN, MICHEL, , ,

Mailing Address 10960 WILSHIRE BLVD

City
LOS ANGELES

State
CA

Zip Code
90024-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331083

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330618

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAYLOR, WILLIAM, , ,

Mailing Address 1876 115TH AVE

City
ALEDO

State
IL

Zip Code
61231-8750

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

301.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330814

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

251.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 305 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATSON, CLIFFORD, , ,

Mailing Address 600 WEST DRIVE

City
GLEN BURNIE

State
MD

Zip Code
21061-2035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.30

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330482

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WESTERHOLD, STEVE, , ,

Mailing Address 3257 ESPLANADE CIR SE

City
RIO RANCHO

State
NM

Zip Code
87124-7621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.20

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331160

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITECAR JR, JOHN P, , ,

Mailing Address 1624 TAYLOR THURSTON ROAD

City
COLUMBUS

State
MS

Zip Code
39701-8597

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GTR ONCOLOGY

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

207.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330720

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITEMAN, KEITH, , ,

Mailing Address 2671 DAISY LANE

City
FALLBROOK

State
CA

Zip Code
92028-9591

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.20

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330471

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIRE

State
MI

Zip Code
49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.44

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.330582

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITY

State
FL

Zip Code
33868-5113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

636.85

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331145

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.40

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 307 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLEState
MIZip Code
49418-2259FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.330459

Amount of Each Receipt this Period

0.10

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331235

Amount of Each Receipt this Period

20937.53

☒ Memo Item
 CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ABRAMS, TAMRA, , ,

Mailing Address 233 KRISTEN LANE PR

City
KENNEWICKState
WAZip Code
99338-8304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

377.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331776

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLE

State
TX

Zip Code
76034-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331738

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331648

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331649

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331650

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331651

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AMSTUTZ, SHERYL, , ,

Mailing Address 1307 S WATER ST #90

City
SILVERTON

State
OR

Zip Code
97381-2471

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

666.00

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331440

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AMSTUTZ, SHERYL, , ,

Mailing Address 1307 S WATER ST #90

City
SILVERTON

State
OR

Zip Code
97381-2471

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331442

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNE

State
TX

Zip Code
76033-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331680

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNE

State
TX

Zip Code
76033-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

537.40

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331682

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. APARICIO, MIRIAM, , ,

Mailing Address 6 SONORA AVENUE

City
SOUTH SAN FRANCISCO

State
CA

Zip Code
94080-5941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ATT

Occupation (for Individual)
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.85

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331271

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARGYLE, ROSELYN, , ,

Mailing Address 3140 SOUTH BRENNAN ROAD

City
HEMLOCK

State
MI

Zip Code
48626-8750

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AD HOME HEALTH CARE

Occupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.65

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331281

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTA

State
FL

Zip Code
34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331712

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331714

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BABCOCK, PAUL, , ,

Mailing Address 3 MEADOWBROOK WAY

City
SAG HARBORState
NYZip Code
11963-1301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331717

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BAHLER, WALTER, , ,

Mailing Address 5927 S CREEKSIDE CT

City
REMINGTONState
INZip Code
47977-8867FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1065.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331818

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BAHLER, WALTER, , ,**

Mailing Address 5927 S CREEKSIDE CT

City
REMINGTONState
INZip Code
47977-8867FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1065.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331819

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **BEGLEY, LINDA, , ,**

Mailing Address 403 ROYALE COURT

City
TROYState
NYZip Code
12180-8559FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331405

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **BELMONTE, JEAN, , ,**

Mailing Address 613 CUSTIS ROAD

City
GLENSIDEState
PAZip Code
19038-2013FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331636

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

205.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 314 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOBEE, THOMAS. G. , ,

Mailing Address 8167 GARY AVE

City
WESTLANDState
MIZip Code
48185-7083FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331526

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331273

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331436

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERSState
ORZip Code
97759-8000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331363

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERSState
ORZip Code
97759-8000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331365

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERSState
ORZip Code
97759-8000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331368

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

235.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRADEN, ANNETTE, , ,

Mailing Address 10710 MIRASOL DRIVE. BLDG.701

City
MIROMAR LAKES

State
FL

Zip Code
33913-7842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.85

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331437

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEW

State
DE

Zip Code
19970-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.60

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331492

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331262

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 317 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTONState
OHZip Code
45383-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331264

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTONState
OHZip Code
45383-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331268

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTONState
OHZip Code
45383-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331563

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRYANT, JUDITH, , ,

Mailing Address 28 WOOD AVE.

City
CONCORDState
NHZip Code
03301-2731FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331732

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTONState
TXZip Code
77079-3182FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331618

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURTON, JOHN, , ,

Mailing Address 5111 CONCHO CREEK BEND

City
AUSTINState
TXZip Code
78735-6438FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
RE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331243

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CALKINS, DAVID, , ,

Mailing Address 620 FOUR HILLS RD SE

City
ALBUQUERQUE

State
NM

Zip Code
87123-4106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331263

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, CHRISTOPHER W, , ,

Mailing Address 103 SOUTH GALA COURT

City
BONAIRE

State
GA

Zip Code
31005-4033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331416

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331632

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 320 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETEState
ILZip Code
60417-3013FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331635

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHANG, JULIA, , ,

Mailing Address 2917 JEFFREY LANE

City
MIDLANDState
MIZip Code
48640-2472FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331471

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLES, DAVE, , ,

Mailing Address 8673 WEST FAWN BROOK STREET

City
BOISEState
IDZip Code
83714-2213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

6140.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331790

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

145.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLLIER, DIANE, , ,

Mailing Address 204 LUDS WAY

City
DOTHAN

State
AL

Zip Code
36303-6350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ALABAMA SOUTH FAMILY PODIATRY

Occupation (for Individual)

PODIATRIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331403

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRIM, PUPPET, , ,

Mailing Address 21351 HWY 140 TRLR 20

City
HESPERUS

State
CO

Zip Code
81326-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331721

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CUSICK, ROBERT, , ,

Mailing Address 4722 SOUTHWEST DOSCH PARK LANE

City
PORTLAND

State
OR

Zip Code
97239-1284

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.45

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331467

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 322 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DENDY, PHYLLIS, , ,

Mailing Address 1808 N. AVENUE H

City
HASKELL

State
TX

Zip Code
79521-3018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331267

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIAZ, ZOILA, , ,

Mailing Address 1430 SOUTHWEST 15TH STREET

City
MIAMI

State
FL

Zip Code
33145-1506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331783

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DRISKILL, TIMOTHY, , ,

Mailing Address 2940 E 45TH PLACE

City
TULSA

State
OK

Zip Code
74105-5204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INSURICA

Occupation (for Individual)
INS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331827

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

515.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGA

State
WY

Zip Code
82331-0399

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331344

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGA

State
WY

Zip Code
82331-0399

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331786

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ECCLESTON, DUANE, , ,

Mailing Address 1207 SPRING BROOK RD

City
MYRTLE CREEK

State
OR

Zip Code
97457-9693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROSEBURG MATTRESS

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331547

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 324 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLESTAD, BOYD, , ,

Mailing Address 30508 SANTA LUNA DRIVE

City
RANCHO PALOS VERDE

State
CA

Zip Code
90275-6318

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331402

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331820

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331821

Amount of Each Receipt this Period

6.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331822

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ENGLISH, JANET, , ,

Mailing Address 929 ROLLING WOODS LANE

City
LAKELAND

State
FL

Zip Code
33813-1249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331475

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EVERETT, WILLIAM, , ,

Mailing Address 107 WOODBURN DRIVE

City
HAMPTON

State
VA

Zip Code
23664-1866

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2007.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331536

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FARQUHAR, MARK, , ,

Mailing Address 52234 HIGHBURY COURT

City
UTICAState
MIZip Code
48315-2866FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LEAR CORPORTIONOccupation (for Individual)
ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331572

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FERRELL, HERB, , ,

Mailing Address 5446 PLEASANTVIEW RD

City
MEMPHISState
TNZip Code
38134-6401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HVAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331708

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESEY, PAUL, , ,

Mailing Address 174 ELBERT WAY

City
BRISTOLState
VAZip Code
24202-6019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1121.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331784

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

220.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESTING, COLLEEN, , ,

Mailing Address 2699 SEVILLE BLVD UNIT 605

City
CLEARWATER

State
FL

Zip Code
33764-1149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A2 GLOBAL ELECTRONICS

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331300

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GORDON, LOUISE, , ,

Mailing Address 4075 BROOKS MILL DRIVE

City
LITHONIA

State
GA

Zip Code
30038-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.97

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331499

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORDON, RON, , ,

Mailing Address 913 ANTLER MEADOW WAY

City
FUQUAY VARINA

State
NC

Zip Code
27526-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331306

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORDON, RON, , ,

Mailing Address 913 ANTLE MEADOW WAY

City
FUQUAY VARINA

State
NC

Zip Code
27526-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331521

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GORDON, RON, , ,

Mailing Address 913 ANTLE MEADOW WAY

City
FUQUAY VARINA

State
NC

Zip Code
27526-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.50

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331834

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOVIN, RONALD, , ,

Mailing Address 11507 CERCA DEL RIO PL

City
TAMPA

State
FL

Zip Code
33617-2620

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331727

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GREENWELL, JIM, , ,

Mailing Address 11136 NORTH TUSCANY RIDGE COURT

City
DUNLAP

State
IL

Zip Code
61525-7533

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.70

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331645

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREVENGOED, GORDON, , ,

Mailing Address 15 PRINCETON COURT

City
ZEELAND

State
MI

Zip Code
49464-2082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331625

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUERRERO, ESTRELLA, , ,

Mailing Address 3404 LAKE PARK AVENUE

City
FALLBROOK

State
CA

Zip Code
92028-7852

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.55

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331283

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331376

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331378

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAWORTH, RONALD, , ,

Mailing Address P O BOX 8435

City
HOBE SOUND

State
FL

Zip Code
33475-8435

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.35

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331689

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HIBDON, DSW, , ,

Mailing Address 1510 SPRING ST

City
GREEN COVE SPRINGS

State
FL

Zip Code
32043-2144

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331438

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HIBDON, DSW, , ,

Mailing Address 1510 SPRING ST

City
GREEN COVE SPRINGS

State
FL

Zip Code
32043-2144

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331441

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331457

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331531

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331734

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331735

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331736

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, SUSAN, , ,

Mailing Address 3307 PLACID PLACE

City
OWENSBOROState
KYZip Code
42303-7040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331851

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JONES, SUSAN, , ,

Mailing Address 3307 PLACID PLACE

City
OWENSBOROState
KYZip Code
42303-7040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331853

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELLY II, JOSEPH, , ,

Mailing Address 6009 TRANQUILITY LANE

City
SUTHERLANDState
VAZip Code
23885-9015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M	D D	Y Y Y Y
08	30	2022

Transaction ID : SA17.331359

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M	D D	Y Y Y Y
08	30	2022

Transaction ID : SA17.331833

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KORPAN, RICHARD, , ,

Mailing Address 703 EMBERGLOW LN.

City
LITTLETONState
COZip Code
80126-5736FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
08	30	2022

Transaction ID : SA17.331772

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

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375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOTLOFF, RONALD, , ,

Mailing Address 167 LUNETALANE

City

RANCHO MISSION VIE

State

CA

Zip Code

92694-1596

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331506

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANG, RICHARD, , ,

Mailing Address 719 15TH AVE E

City

SEATTLE

State

WA

Zip Code

98112-4525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.93

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331239

Amount of Each Receipt this Period

12.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANIUS, BARBARA, , ,

Mailing Address 12662 HARRIET CIRCLE

City

DALLAS

State

TX

Zip Code

75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331465

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LARSEN, LAWRENCE, , ,

Mailing Address 4331 GREEN TREE DRIVE

City
SACRAMENTO

State
CA

Zip Code
95823-1978

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOS RIOS COLLEGE DISTRICT

Occupation (for Individual)
ADJUNCT FACULTY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331758

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LENGEL, MARY, , ,

Mailing Address 8092 NORTH UNION CITY ROAD

City
DENVER

State
IN

Zip Code
46926-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALMART

Occupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.80

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331841

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEONARD, WILLIAM, , ,

Mailing Address 36560 SAGUARO COURT

City
RANCHO MIRAGE

State
CA

Zip Code
92270-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WML MANAGEMENT LLC

Occupation (for Individual)
PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331338

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEONARD, WILLIAM, , ,

Mailing Address 36560 SAGUARO COURT

City

RANCHO MIRAGE

State

CA

Zip Code

92270-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WML MANAGEMENT LLC

Occupation (for Individual)

PROPERTY MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331339

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, SUSAN, , ,

Mailing Address 13 KAITLYN LANE

City

BLOOMSBURG

State

PA

Zip Code

17815-8833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

608.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331604

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOUIE, WINDSOR, , ,

Mailing Address P.O. BOX 1364

City

TUSTIN

State

CA

Zip Code

92781-1364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331384

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

245.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARQUEZ, HORACIO, , ,

Mailing Address P.O. BOX 914

City
MCLEAN

State
VA

Zip Code
22101-0914

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.80

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331852

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARSH, ALANA, , ,

Mailing Address 4275 PANORAMIC VIEW DRIVE

City
MARYVILLE

State
TN

Zip Code
37804-3982

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331756

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATHERS, DAVID, , ,

Mailing Address 1458 TANNERY CIRCLE

City
MIDLOTHIAN

State
VA

Zip Code
23113-2644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331653

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331811

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331812

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331815

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331816

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCALEARNEY, PHIL, , ,

Mailing Address 602 LAKESHORE DR.

City
HANNA CITY

State
IL

Zip Code
61536-9520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331619

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCBRIDE, JAMES, , ,

Mailing Address 58 HIGH RIDGE ROAD

City
NORWAY

State
ME

Zip Code
04268-4882

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331313

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

585.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 341 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022**Transaction ID : SA17.331768**

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, ANNAMAY, , ,

Mailing Address 732 VILLITA LANE

City
LADY LAKEState
FLZip Code
32159-9128FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022**Transaction ID : SA17.331355**

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACHState
FLZip Code
32168-7940FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2022**Transaction ID : SA17.331578**

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331396

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331398

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOSS, PATRICIA, , ,

Mailing Address 2665 WHISPERING PINE

City
TWIN FALLS

State
ID

Zip Code
83301-8939

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

430.35

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331406

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURPHY, HEIDI, , ,

Mailing Address 9034 HUNTERS BROOK COURT

City
ELK GROVEState
CAZip Code
95758-8033FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331303

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEAL, ROLLIE, , ,

Mailing Address 17 LARKSPUR LN

City
CLARKSBURGState
WVZip Code
26301-6871FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331781

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, ROBERT, , ,

Mailing Address 312 BIRCHWOOD CIR

City
BRANDONState
SDZip Code
57005-2105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVERA HEALTHOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331382

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

130.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NELSON, ROBERT, , ,

Mailing Address 312 BIRCHWOOD CIR

City
BRANDONState
SDZip Code
57005-2105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVERA HEALTHOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331411

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELSON, ROBERT, , ,

Mailing Address 312 BIRCHWOOD CIR

City
BRANDONState
SDZip Code
57005-2105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVERA HEALTHOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331421

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, ROBERT, , ,

Mailing Address 312 BIRCHWOOD CIR

City
BRANDONState
SDZip Code
57005-2105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVERA HEALTHOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331423

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 345 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OBRIEN, HARVEY, , ,

Mailing Address 98BATES ST.

City
MILLINOCKET

State
ME

Zip Code
04462-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331538

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OCONNOR, JAMES, , ,

Mailing Address 2520 LINDENWOOD DR.

City
PITTSBURGH

State
PA

Zip Code
15241-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GSL

Occupation (for Individual)
LANDSCAPING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331484

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ODTERLUND, JENNY, , ,

Mailing Address 704 RIVER OVERLOOK

City
FORSYTH

State
GA

Zip Code
31029-4895

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

725.15

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331444

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 346 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLSEN, WILLIAM, , ,

Mailing Address 8796 CEDAR HAMMOCK BLVD

City
NAPLES

State
FL

Zip Code
34112-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331628

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSTER, MARLENE, , ,

Mailing Address 2859 DAISYBROOK ST NW

City
NORTH CANTON

State
OH

Zip Code
44720-8168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OSTER ENTERPRISES

Occupation (for Individual)
OFFICE MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.02

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331551

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OXFORD, LARRY B, , ,

Mailing Address 18211 BULVERDE RD #8307

City
SAN ANTONIO

State
TX

Zip Code
78259-3716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALAMO HEIGHTS ISD

Occupation (for Individual)
TENNIS CENTER DIRECTOR AND TEI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331250

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEONOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331277

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PREWITT, DENNIS, , ,

Mailing Address 1852 DAVIN DR.

City
GOSHENState
OHZip Code
45122-9733FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STV INCORPORATEDOccupation (for Individual)
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331453

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. QUINN, CHARLES, , ,

Mailing Address 179 JALYN RAE COURT

City
LAS VEGASState
NVZip Code
89183-4129FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331728

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RANDALL, BRAD, , ,

Mailing Address 5168 LAREDO ST

City
INDIANAPOLIS

State
IN

Zip Code
46237-2030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMTRAK

Occupation (for Individual)
CARMEN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331464

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICHEY, DAVID, , ,

Mailing Address 61 WILDHORSE LOOP

City
RSM

State
CA

Zip Code
92688-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DURADEK/DURARAIL

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331514

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHEY, JOE, , ,

Mailing Address 4500 16ST

City
RACINE

State
WI

Zip Code
53405-3110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331850

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSEN, CARL, , ,

Mailing Address 2046 US HWY 441N

City
DUBLINState
GAZip Code
31021-0347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARL VINSON VAOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331749

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANTOSUOSSO, JOSEPH, , ,

Mailing Address 13615 209TH AVE NE

City
WOODINVILLEState
WAZip Code
98077-7600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CASCADE CONSOLIDATED INDUSTRIESOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331309

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAPP, MARY, , ,

Mailing Address 1305 BERON DR.

City
METAIRIEState
LAZip Code
70003-5513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

903.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331269

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 350 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKONState
OKZip Code
73099-5781FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331259

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SKIPITIS, GREGORY, , ,

Mailing Address 2626 EDITH AVE SUITE B

City
REDDINGState
CAZip Code
96001-3056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331782

Amount of Each Receipt this Period

125.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, CHESTER, , ,

Mailing Address 2060 WHEELER LANE

City
SAINT JOHNSState
FLZip Code
32259-9045FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331561

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

270.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 351 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, RANDY, , ,

Mailing Address 1305 WEST SHAW

City
CARLSBADState
NMZip Code
88220-4235FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331350

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNYDER, ROBERT A, , ,

Mailing Address P O BOX 141

City
FALLS VILLAGEState
CTZip Code
06031-0141FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDWARD R HAMILTON,BOOKSELLEROccupation (for Individual)
SHIP BOOKS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331840

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPAETH PHD, EDMUND, , ,

Mailing Address 26536 LOVE LANE

City
RAMONAState
CAZip Code
92065-4822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

435.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331641

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

110.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPEVAK, IRINA, , ,

Mailing Address 9512 KEELER AVENUE

City
SKOKIEState
ILZip Code
60076-1445FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331741

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOWState
VAZip Code
20136-2532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331490

Amount of Each Receipt this Period

1.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331371

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

61.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 353 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331805

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEWState
CAZip Code
94043-4428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331843

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRACK, CARLTON, , ,

Mailing Address 15624 LATSON STREET

City
HOUSTONState
TXZip Code
77069-1628FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331251

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRANDBERG, ERIC, , ,

Mailing Address 231 COLUMBIA STREET

City
OMAK

State
WA

Zip Code
98841-9625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
MANUFACTURING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331462

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City

NEWPORT BEACH

State

CA

Zip Code

92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331247

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City

NEWPORT BEACH

State

CA

Zip Code

92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331345

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TESAR, MICHAEL, , ,

Mailing Address 10 AURORA DRIVE

City
ROLLING HILLS ESTA

State
CA

Zip Code
90274-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1843.74

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331724

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.34

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331257

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTIN

State
TX

Zip Code
78731-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

786.75

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331825

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 356 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRUDEAU, DANIEL, , ,

Mailing Address P.O. BOX 622

City
SANTA ROSAState
CAZip Code
95402-0622FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331596

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRUDEL, PATRICIA, , ,

Mailing Address 4303 NE BIRDHAVEN

City
NEWBERGState
ORZip Code
97132-6993FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331459

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRUDEL, PATRICIA, , ,

Mailing Address 4303 NE BIRDHAVEN

City
NEWBERGState
ORZip Code
97132-6993FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

581.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331466

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRUDEL, PATRICIA, , ,

Mailing Address 4303 NE BIRDHAVEN

City
NEWBERGState
ORZip Code
97132-6993FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331468

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VASQUEZ, RANDOLPH, , ,

Mailing Address 1010 KEENE DRIVE

City
LA HABRAState
CAZip Code
90631-7150FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331280

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWNState
NJZip Code
08057-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331583

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOOD

State
NY

Zip Code
11731-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331571

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOOD

State
NY

Zip Code
11731-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331574

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOOD

State
NY

Zip Code
11731-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

366.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331575

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOOD

State
NY

Zip Code
11731-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331576

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOOD

State
NY

Zip Code
11731-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.05

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331577

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELDEN, ANN, , ,

Mailing Address 7009 LEE PARK COURT

City
FALLS CHURCH

State
VA

Zip Code
22042-3907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.48

Date of Receipt

08 / **30** / **2022**

Transaction ID : SA17.331681

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WELDEN, ANN, , ,

Mailing Address 7009 LEE PARK COURT

City
FALLS CHURCH

State
VA

Zip Code
22042-3907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.48

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331683

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHALEY, FRED, , ,

Mailing Address 114 RAFAEL BLVD NE

City
SAINT PETERSBURG

State
FL

Zip Code
33704-3740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331357

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAK

State
AK

Zip Code
99567-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.75

Date of Receipt

08 / 30 / 2022

Transaction ID : SA17.331399

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

585.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAKState
AKZip Code
99567-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 30 / 2022**Transaction ID : SA17.331800**

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAKState
AKZip Code
99567-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 30 / 2022**Transaction ID : SA17.331845**

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, SARAH, , ,

Mailing Address 1800 EL PASEO #2016

City
HOUSTONState
TXZip Code
77054-3016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GARDEN TERRACE NURSING HEOccupation (for Individual)
REGISTERED DIETITIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.40

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 30 / 2022**Transaction ID : SA17.331510**

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 362 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, SARAH, , ,

Mailing Address 1800 EL PASEO #2016

City
HOUSTONState
TXZip Code
77054-3016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GARDEN TERRACE NURSING HEOccupation (for Individual)
REGISTERED DIETITIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331511

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, SARAH, , ,

Mailing Address 1800 EL PASEO #2016

City
HOUSTONState
TXZip Code
77054-3016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GARDEN TERRACE NURSING HEOccupation (for Individual)
REGISTERED DIETITIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331513

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, SARAH, , ,

Mailing Address 1800 EL PASEO #2016

City
HOUSTONState
TXZip Code
77054-3016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GARDEN TERRACE NURSING HEOccupation (for Individual)
REGISTERED DIETITIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331515

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

110.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILSON, MARILYN R, , ,

Mailing Address P.O. BOX 235

City
HAINES

State
AK

Zip Code
99827-0235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331260

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, MICHAEL, , ,

Mailing Address 18814 N 51ST DR.

City
GLENDALE

State
AZ

Zip Code
85308-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331849

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YEAGER, KATHI, , ,

Mailing Address 15660 DALLAS PKWY, STE 1100

City
DALLAS

State
TX

Zip Code
75248-3366

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JKL REALTY

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

Transaction ID : SA17.331409

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZOLOTAREV, MIKHAIL, , ,

Mailing Address 3091BRIGHTPN 5STR. APT 6N

City
BROOKLYNState
NYZip Code
11235-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331480

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZOLOTAREV, MIKHAIL, , ,

Mailing Address 3091BRIGHTPN 5STR. APT 6N

City
BROOKLYNState
NYZip Code
11235-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2022

Transaction ID : SA17.331483

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRONG LEADERS FUND

Mailing Address 1900 CAMPUS COMMONS DR
SUITE 100City
RESTONState
VAZip Code
20191-FEC ID number of contributing
federal political committee.

C C00812685

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333679

Amount of Each Receipt this Period

400000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

400100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 365 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.331868

Amount of Each Receipt this Period

1131.95

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNE

State
TX

Zip Code
76033-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.332034

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BERRY, WILLIAM, , ,

Mailing Address 416 OAK HOLLOW LANE

City
FORT WORTH

State
TX

Zip Code
76112-1022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

426.00

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.332592

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERSAGLIERI, RONALD, , ,

Mailing Address 6783 CHELTON DRIVE

City
OAKLANDState
CAZip Code
94611-1619FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332519

Amount of Each Receipt this Period

0.15

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.331950

Amount of Each Receipt this Period

0.20

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332472

Amount of Each Receipt this Period

0.20

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.55

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 367 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332485

Amount of Each Receipt this Period

0.18

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRACHFELD, DONALD, , ,

Mailing Address 25 FOUR SEASONS DRIVE

City
NORTH CALDWELL

State
NJ

Zip Code
07006-6134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.331925

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRADSHAW, SUE, , ,

Mailing Address 10800 AUBURN LANE

City
FREDERICKSBURG

State
VA

Zip Code
22408-2592

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332425

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.331895

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.331905

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.331908

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTONState
OHZip Code
45383-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.331917

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURGESS, BARBARA, , ,

Mailing Address 3177 CHERRY MEADOW PATH

City
LEXINGTONState
KYZip Code
40509-8547FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.331932

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURLOCK JR, RALPH C, , ,

Mailing Address 1690 KAMSACK DR.

City
SUNNYVALEState
CAZip Code
94087-5214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332311

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 370 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CALES, NANCY, , ,

Mailing Address P.O. BOX 502

City
GLEN SAINT MARY

State
FL

Zip Code
32040-0502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.331876

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.331971

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLES, DAVE, , ,

Mailing Address 8673 WEST FAWN BROOK STREET

City
BOISE

State
ID

Zip Code
83714-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

6140.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332212

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COUCH, JOSEPH, , ,

Mailing Address 112 HAMILTON WAY

City
BREMEN

State
GA

Zip Code
30110-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.22

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332038

Amount of Each Receipt this Period

0.22

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City

SAN CLEMENTE

State

CA

Zip Code

92673-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.70

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332530

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DONAHUE, NANCY, , ,

Mailing Address 10139 KRESS ROAD

City

PINCKNEY

State

MI

Zip Code

48169-9373

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.60

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332574

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 372 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022**Transaction ID : SA17.332508**

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022**Transaction ID : SA17.332509**

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022**Transaction ID : SA17.332510**

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332512

Amount of Each Receipt this Period

6.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332513

Amount of Each Receipt this Period

0.18

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FABRETTI, RONALD, , ,

Mailing Address 1205 HONEOYE FALLS FIVE PT RD

City
HONEOYE FALLS

State
NY

Zip Code
14472-9046

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GETINGE AB

Occupation (for Individual)
SERVICE TECH II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.50

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332557

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FALLON, JOHN, , ,

Mailing Address 2702 DOUGLAS AVENUE #125

City
DALLAS

State
TX

Zip Code
75219-3456

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332010

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTON

State
SC

Zip Code
29401-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332342

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTON

State
SC

Zip Code
29401-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

678.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332343

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 375 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332163

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332164

Amount of Each Receipt this Period

0.08

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332023

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332024

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332025

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, DONALD, , ,

Mailing Address 8031 WINTER GARDENS BLVD, APT #21

City
EL CAJON

State
CA

Zip Code
92021-1480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
7-ELEVEN SOUTHLAND CORP.

Occupation (for Individual)
SENIOR SALES ASSOCIATES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

490.70

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.331891

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLAState
NYZip Code
11501-3423FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332237

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONTState
ILZip Code
61568-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332627

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRISON, MYRON, , ,

Mailing Address POBOX 4144, VENTURA

City
CHINCOTEAGUEState
CAZip Code
93007-0144FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARRISON INDOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

516.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332346

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRISON, MYRON, , ,

Mailing Address POBOX 4144, VENTURA

City
CHINCOTEAGUE

State
CA

Zip Code
93007-0144

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARRISON IND

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332348

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIMAN, NANCY, , ,

Mailing Address P.O. BOX 549

City
WOODACRE

State
CA

Zip Code
94973-0549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.90

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332351

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JAMES, JERRY, , ,

Mailing Address 409-42 AVE.

City
GREELEY

State
CO

Zip Code
80634-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
O-I

Occupation (for Individual)
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

510.90

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.331939

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LITRELL, LINDA, , ,

Mailing Address 216 HEATHER COURT

City
FLORENCEState
ALZip Code
35630-1489FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332029

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTONState
NDZip Code
58237-1118FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332359

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCDONALD, CYNTHIA, , ,

Mailing Address P.O. BOX 784

City
MILTONState
FLZip Code
32572-0784FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332189

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.92

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEULLEN, NORMAN, , ,

Mailing Address 929 MANGROVE EDGE COURT

City
BRADENTON

State
FL

Zip Code
34208-5710

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SISCO

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332405

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332008

Amount of Each Receipt this Period

10.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332009

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **MOBLEY, TYMA, , ,**

Mailing Address 23917 PEDERNALES DRIVE

City
SPICEWOODState
TXZip Code
78669-1491FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
R.N. NICU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332506

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **MOBLEY, TYMA, , ,**

Mailing Address 23917 PEDERNALES DRIVE

City
SPICEWOODState
TXZip Code
78669-1491FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
R.N. NICU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332511

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **NICKLESS, SHARON, , ,**

Mailing Address 2589 SPENCER CREEK RD

City
CAMDENTONState
MOZip Code
65020-8314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1510.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332411

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.65

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NICKLESS, SHARON, , ,

Mailing Address 2589 SPENCER CREEK RD

City
CAMDENTON

State
MO

Zip Code
65020-8314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332415

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETESCH, BRUCE, , ,

Mailing Address 2792 MOUNT VERNON HICKORY MOUNTAIN

City
SILER CITY

State
NC

Zip Code
27344-6612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332032

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POPPE, LORI, , ,

Mailing Address P.O. BOX 1112

City
BAKER

State
MT

Zip Code
59313-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1386.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332014

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 383 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PUCKETT, EARL, , ,

Mailing Address 1201 MAHOGANY PLACE

City
PALM BEACH GARDENS

State
FL

Zip Code
33418-8080

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332467

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332173

Amount of Each Receipt this Period

1.80

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332174

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

6.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 384 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332175

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332176

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

284.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332177

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

28.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 385 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332178

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.55

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332180

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COAST

State
FL

Zip Code
32137-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.04

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332286

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 386 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANTOSUOSSO, JOSEPH, , ,

Mailing Address 13615 209TH AVE NE

City
WOODINVILLE

State
WA

Zip Code
98077-7600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CASCADE CONSOLIDATED INDUSTRIES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332042

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAYRE, DANIEL, , ,

Mailing Address 1128 AMHERST DR. APT B2

City
SIDNEY

State
OH

Zip Code
45365-3476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.45

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332545

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAYRE, DANIEL, , ,

Mailing Address 1128 AMHERST DR. APT B2

City
SIDNEY

State
OH

Zip Code
45365-3476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.45

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332546

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 387 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAYRE, DANIEL, , ,

Mailing Address 1128 AMHERST DR. APT B2

City
SIDNEY

State
OH

Zip Code
45365-3476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.45

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332547

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAYRE, DANIEL, , ,

Mailing Address 1128 AMHERST DR. APT B2

City
SIDNEY

State
OH

Zip Code
45365-3476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.45

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332549

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAYRE, DANIEL, , ,

Mailing Address 1128 AMHERST DR. APT B2

City
SIDNEY

State
OH

Zip Code
45365-3476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.45

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332550

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 388 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAYRE, DANIEL, , ,

Mailing Address 1128 AMHERST DR. APT B2

City
SIDNEYState
OHZip Code
45365-3476FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.45

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332551

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHERMBECK, JULIE, , ,

Mailing Address 2043 HAMILTON NEW LONDON RD

City
HAMILTONState
OHZip Code
45013-9540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.20

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332503

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTONState
WAZip Code
98058-8701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332633

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.20

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 389 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTONState
WAZip Code
98058-8701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332634

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTONState
WAZip Code
98058-8701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332636

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SKIPITIS, GREGORY, , ,

Mailing Address 2626 EDITH AVE SUITE B

City
REDDINGState
CAZip Code
96001-3056FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

491.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332640

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

14.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 390 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENO

State
NV

Zip Code
89509-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.15

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332516

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENO

State
NV

Zip Code
89509-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.15

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332518

Amount of Each Receipt this Period

0.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENO

State
NV

Zip Code
89509-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.15

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332520

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 391 OF 1424

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENOState
NVZip Code
89509-2344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332521

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENOState
NVZip Code
89509-2344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332522

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENOState
NVZip Code
89509-2344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332523

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4.05

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 392 OF 1424

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENOState
NVZip Code
89509-2344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332524

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNYDER, ROBERT A, , ,

Mailing Address P O BOX 141

City
FALLS VILLAGEState
CTZip Code
06031-0141FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDWARD R HAMILTON,BOOKSELLEROccupation (for Individual)
SHIP BOOKS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332179

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOLACE, MARIE, , ,

Mailing Address 2824 N. POWER ROAD, STE. 113

City
MESAState
AZZip Code
85215-1674FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

326.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332142

Amount of Each Receipt this Period

0.75

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOWState
VAZip Code
20136-2532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332330

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STROUP, JUDIE, , ,

Mailing Address 858 GRAND HARBOUR W

City
MIRAMAR BEACHState
FLZip Code
32550-4813FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332378

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WASSERMAN, MICHAEL, , ,

Mailing Address P.O. BOX 130

City
VALLEY STREAMState
NYZip Code
11582-0130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332587

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 394 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATSON, ERIC, , ,

Mailing Address 1000 NE 95TH ST

City
OCALA

State
FL

Zip Code
34479-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.331994

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAK

State
AK

Zip Code
99567-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.331947

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAK

State
AK

Zip Code
99567-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332104

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 395 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAK

State
AK

Zip Code
99567-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332629

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITY

State
FL

Zip Code
33868-5113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.85

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332043

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332654

Amount of Each Receipt this Period

32843.42

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 396 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTI

State
MI

Zip Code
48197-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333608

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTI

State
MI

Zip Code
48197-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333610

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDS

State
MI

Zip Code
49515-0671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333144

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 397 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333054

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333059

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333060

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

30.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNE

State
TX

Zip Code
76033-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333490

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNE

State
TX

Zip Code
76033-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333550

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDROS, ANN, , ,

Mailing Address P O BOX 3651

City
CARMEL BY THE SEA

State
CA

Zip Code
93921-3651

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1878.35

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333092

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDROS, ANN, , ,

Mailing Address P O BOX 3651

City
CARMEL BY THE SEA

State
CA

Zip Code
93921-3651

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1878.35

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333093

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDROS, ANN, , ,

Mailing Address P O BOX 3651

City
CARMEL BY THE SEA

State
CA

Zip Code
93921-3651

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1878.35

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333096

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLE

State
IL

Zip Code
60532-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.332878

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLE

State
IL

Zip Code
60532-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332883

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLE

State
IL

Zip Code
60532-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332885

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTA

State
FL

Zip Code
34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333249

Amount of Each Receipt this Period

22.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 401 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332662

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAXTER, CRAIG, , ,

Mailing Address 797 E GABLE LANE

City
MIDVALEState
UTZip Code
84047-1782FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332920

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BAXTER, CRAIG, , ,

Mailing Address 797 E GABLE LANE

City
MIDVALEState
UTZip Code
84047-1782FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332927

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

170.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333174

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENEDETTO, SUZANNE, , ,

Mailing Address 23 STRATTON

City
MIDDLETOWN

State
NY

Zip Code
10940-3113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAIN STREET TITLE SETTLEMENT SVCS

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333505

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLE

State
MD

Zip Code
21234-3393

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333195

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 403 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERTIN, JULIE, , ,

Mailing Address 4359 PARKDALE AVE NW

City
CANTONState
OHZip Code
44718-2139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSDISTRICTOccupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333510

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333107

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, MARIE, , ,

Mailing Address 11431 RUBY CANYON LANE

City
HOUSTONState
TXZip Code
77095-4863FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333425

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUCE, LLOYD, , ,

Mailing Address 7021 NORTH EDGEWOOD PLACE

City
TUCSON

State
AZ

Zip Code
85704-6924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333614

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUCE, LLOYD, , ,

Mailing Address 7021 NORTH EDGEWOOD PLACE

City
TUCSON

State
AZ

Zip Code
85704-6924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333615

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332723

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 405 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332734

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332737

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUNN, DANIEL, , ,

Mailing Address POBOX 5005 PMB 116

City
RANCHO SANTA FE

State
CA

Zip Code
92067-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DANIEL W. BUNN

Occupation (for Individual)
INVESTORS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

266.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332778

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURNS, DANE, , ,

Mailing Address 43322 SNIDER RD NEW LONDON NC

City
NEW LONDON

State
NC

Zip Code
28127-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2022

Transaction ID : SA17.332712

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPBELL, DR RICK, , ,

Mailing Address P.O. BOX 680055

City
PARK CITY

State
UT

Zip Code
84068-0055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2022

Transaction ID : SA17.333381

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARMONA, FRANK, , ,

Mailing Address 14854 DAYTONA COURT

City
WOODBIDGE

State
VA

Zip Code
22193-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

241.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2022

Transaction ID : SA17.332875

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1085.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMAN

State
SC

Zip Code
29349-5600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332801

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332743

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333470

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAMBERS, TERESA, , ,

Mailing Address 17230 OAKDALE RD

City
DALLAS

State
OR

Zip Code
97338-9653

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHAMBERS BROTHERS DOOR

Occupation (for Individual)
OFFICE MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332840

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COOK, DOUGLAS, , ,

Mailing Address 2518 OAK ALLEY BOULEVARD

City
MONROE

State
LA

Zip Code
71201-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.70

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333026

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COOK, DOUGLAS, , ,

Mailing Address 2518 OAK ALLEY BOULEVARD

City
MONROE

State
LA

Zip Code
71201-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

467.70

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333048

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CORY, JAY, , ,

Mailing Address 435 WILLOW VISTA DRIVE

City
EL LAGOState
TXZip Code
77586-6019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333602

Amount of Each Receipt this Period

11.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRIM, PUPPET, , ,

Mailing Address 21351 HWY 140 TRLR 20

City
HESPERUSState
COZip Code
81326-9378FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333412

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DANIEL, RHONDA, , ,

Mailing Address 140 DANIEL CUTOFF

City
WOODLANDState
GAZip Code
31836-5202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332755

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

71.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DICKERSON, HAZEL A, , ,

Mailing Address 80 CAYUGA ROAD

City
LAKE ORIONState
MIZip Code
48362-1300FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333342

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DICKERSON, HAZEL A, , ,

Mailing Address 80 CAYUGA ROAD

City
LAKE ORIONState
MIZip Code
48362-1300FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333343

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DILEONARDO, ELLA, , ,

Mailing Address 8278 SE ANGELINA COURT

City
HOBE SOUNDState
FLZip Code
33455-8946FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333056

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DRISKILL, TIMOTHY, , ,

Mailing Address 2940 E 45TH PLACE

City
TULSA

State
OK

Zip Code
74105-5204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INSURICA

Occupation (for Individual)
INS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333368

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUERST, JOHN, , ,

Mailing Address 13512 DOERFLER ROAD SOUTHEAST

City

SILVERTON

State

OR

Zip Code

97381-9212

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332874

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUNCAN, CHARLES, , ,

Mailing Address 202 PRESERVATION CIRCLE

City

PAWLEYS ISLAND

State

SC

Zip Code

29585-8220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332728

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

675.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ECHOLS, DON, , ,

Mailing Address 3461 JERROLD BOULEVARD

City
BRUNSWICKState
OHZip Code
44212-2225FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332902

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EISNER, GLEN, , ,

Mailing Address 12785 W DESERT VISTA TRAIL

City
PEORIAState
AZZip Code
85383-2522FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333675

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EVERETT, WILLIAM, , ,

Mailing Address 107 WOODBURN DRIVE

City
HAMPTONState
VAZip Code
23664-1866FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2007.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332730

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

365.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FARRELL, PATRICIA, , ,

Mailing Address 192 HEATHERTON WAY

City
WINSTON SALEM

State
NC

Zip Code
27104-4446

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333329

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FISHER, TIMOTHY, , ,

Mailing Address 3950 E KOKOPELLI LN

City
FLAGSTAFF

State
AZ

Zip Code
86004-7873

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332719

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLYNN, DAN JOAN, , ,

Mailing Address 17421 N FLICKER AV

City
NAMPA

State
ID

Zip Code
83687-4835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

455.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332705

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GEHRING, MARGERY, , ,

Mailing Address 10404 LAKE LOUISA ROAD

City
CLERMONT

State
FL

Zip Code
34711-8937

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333577

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GEVEDON, DOUGLAS, , ,

Mailing Address 6124 KAY BROOK DRIVE

City
BYRAM

State
MS

Zip Code
39272-9606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333298

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEVEDON, DOUGLAS, , ,

Mailing Address 6124 KAY BROOK DRIVE

City
BYRAM

State
MS

Zip Code
39272-9606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333583

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333241

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOWER, ELLEN, , ,

Mailing Address 7435 CYPRESS BEND MNR.

City
VERO BEACH

State
FL

Zip Code
32966-5172

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.90

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333228

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, LOYCE, , ,

Mailing Address 905 WEST CHATHAM DRIVE

City
PAYSON

State
AZ

Zip Code
85541-6213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332683

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 416 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GREEN, LOYCE, , ,

Mailing Address 905 WEST CHATHAM DRIVE

City
PAYSON

State
AZ

Zip Code
85541-6213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332698

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREESON, JOHN, , ,

Mailing Address 6382 HOSFIELD DR.

City
TULARE

State
CA

Zip Code
93274-9510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DSI

Occupation (for Individual)
INVENTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333671

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREVENGOED, GORDON, , ,

Mailing Address 15 PRINCETON COURT

City
ZEELAND

State
MI

Zip Code
49464-2082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333102

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HACKER, ELEANOR, , ,

Mailing Address 2413 N ASHTON PL

City
MESAState
AZZip Code
85215-2001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333650

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELDState
CTZip Code
06759-2809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333290

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMOND, ANN, , ,

Mailing Address 3304 SHASTA DAM BLVD, #127

City
SHASTA LAKEState
CAZip Code
96019-9595FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332886

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

145.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 418 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HANCOCK, TERRY, , ,

Mailing Address 1713 MILL STREET

City
CAMDEN

State
SC

Zip Code
29020-2730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.35

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333525

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONT

State
IL

Zip Code
61568-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332822

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONT

State
IL

Zip Code
61568-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333661

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 419 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONTState
ILZip Code
61568-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333663

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERNDON, TIM, , ,

Mailing Address 413 GARTH CT.

City
APOPKAState
FLZip Code
32712-4051FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TIM HERNDON INS AGENCY INC.Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333503

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERNDON, TONIA, , ,

Mailing Address 3623 HAWK ISLAND DR.

City
BRADENTONState
FLZip Code
34208-9411FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333000

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 420 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **HOWES, ALVIN, , ,**

Mailing Address 1841 ARBOR KNOLL LOOP

City
TRINITY

State
FL

Zip Code
34655-7205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332754

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **HUBBARD, PAULINE, , ,**

Mailing Address 1316 SOUTH 10TH

City
KINGFISHER

State
OK

Zip Code
73750-4236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333041

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **HUTCHINSON, CRAIG, , ,**

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333527

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 421 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333640

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACKSON, JOHN F, , ,

Mailing Address 203 SEVEN OAKS DR.

City
WASHINGTON

State
GA

Zip Code
30673-1463

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333587

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333177

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 422 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333179

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333180

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333181

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 423 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333183

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAESGEN, DIETER, , ,

Mailing Address 19460 FRAZIER

City
ROCKY RIVER

State
OH

Zip Code
44116-1727

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333124

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KASPARECK, MARION, , ,

Mailing Address 17 EAST SHELL WAY

City
LAVALLETTE

State
NJ

Zip Code
08735-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.45

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332739

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332750

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332752

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333591

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333592

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333594

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KIRBY, KATHY, , ,

Mailing Address 412 WENNINGTON PL

City
GREER

State
SC

Zip Code
29651-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333135

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KLINE, MARCIA, , ,

Mailing Address 4042 CAISSONS COURT

City
ENOLA

State
PA

Zip Code
17025-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333331

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRIBS, LEONARD, , ,

Mailing Address 2314 ASHLAND STREET

City
HOUSTON

State
TX

Zip Code
77008-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333426

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRIBS, LEONARD, , ,

Mailing Address 2314 ASHLAND STREET

City
HOUSTON

State
TX

Zip Code
77008-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333427

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 427 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KRISKO, LINDA, , ,

Mailing Address 1422 HAMILTON ST

City
ALLENTOWNState
PAZip Code
18102-4233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENESIS 50:20Occupation (for Individual)
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333145

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333469

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANDI, ELLEN, , ,

Mailing Address 118 84TH STREET

City
BROOKLYNState
NYZip Code
11209-4314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332701

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 428 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **LANG, RICHARD, , ,**

Mailing Address 719 15TH AVE E

City
SEATTLE

State
WA

Zip Code
98112-4525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.93

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332681

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **LANIUS, BARBARA, , ,**

Mailing Address 12662 HARRIET CIRCLE

City
DALLAS

State
TX

Zip Code
75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333609

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **LAWSON, CHARLES, , ,**

Mailing Address 140 VAN GOGH COVE

City
BRADENTON

State
FL

Zip Code
34212-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333574

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 429 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEDFORD, DEBRA, , ,

Mailing Address 92 BRYANT RD

City
SUMMERVILLE

State
GA

Zip Code
30747-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332884

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEDFORD, DEBRA, , ,

Mailing Address 92 BRYANT RD

City
SUMMERVILLE

State
GA

Zip Code
30747-6201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333032

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEE, STUART, , ,

Mailing Address 1575 ROBSHEAL DRIVE

City
SAN JOSE

State
CA

Zip Code
95125-4669

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HI DEF AUDIO VIDEO

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

264.35

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333498

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEWIS, SUSAN, , ,

Mailing Address 13 KAITLYN LANE

City

BLOOMSBURG

State

PA

Zip Code

17815-8833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

608.10

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333407

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LITRELL, LINDA, , ,

Mailing Address 216 HEATHER COURT

City

FLORENCE

State

AL

Zip Code

35630-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

290.72

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332813

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOPEZ, JORGE, , ,

Mailing Address 14314SW. 97 TERR.

City

MIAMI

State

FL

Zip Code

33186-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

JAXI BUILDERS, INC.

Occupation (for Individual)

PROJECT MANAGER

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

710.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333270

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LORENZ, ELLENE, , ,

Mailing Address 12403 169TH AVENUE SOUTHEAST

City
RENTON

State
WA

Zip Code
98059-6501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.18

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333440

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOVEJOY, BETTY, , ,

Mailing Address 5500 PINERIDGE DRIVE

City
ARLINGTON

State
TX

Zip Code
76016-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333429

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTIN, FRED, , ,

Mailing Address NORTH 115TH WAY

City
SCOTTSDALE

State
AZ

Zip Code
85255-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332987

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 432 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARTIN, FRED, , ,

Mailing Address NORTH 115TH WAY

City
SCOTTSDALEState
AZZip Code
85255-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332988

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTIN, FRED, , ,

Mailing Address NORTH 115TH WAY

City
SCOTTSDALEState
AZZip Code
85255-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332990

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARTIN, FRED, , ,

Mailing Address NORTH 115TH WAY

City
SCOTTSDALEState
AZZip Code
85255-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332994

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

95.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 433 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARTIN, FRED, , ,

Mailing Address NORTH 115TH WAY

City
SCOTTSDALE

State
AZ

Zip Code
85255-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332996

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333547

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333548

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCOY, DANIEL, , ,

Mailing Address 7840 JOYCE DRIVE

City
CLEVELAND

State
OH

Zip Code
44130-7149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333322

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEIER, CURT, , ,

Mailing Address 4721 RD 18

City
LAGRANGE

State
WY

Zip Code
82221-8410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
AGRICULTURE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332666

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, ANNAMAY, , ,

Mailing Address 732 VILLITA LANE

City
LADY LAKE

State
FL

Zip Code
32159-9128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

580.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333214

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

515.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.332888

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333034

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, DAVE, , ,

Mailing Address 1958 KIRBY RD.

City
LEBANON

State
OH

Zip Code
45036-9166

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333161

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIMMS, JOY, , ,

Mailing Address 8303 NORFOLK DR.

City
AMARILLO

State
TX

Zip Code
79119-6442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333347

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332793

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332794

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, ELDEN, , ,

Mailing Address 1533 W LACEY

City
HAYDEN

State
ID

Zip Code
83835-8762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332867

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURILLO, STEVEN, , ,

Mailing Address 1405 SUZANNE AVENUE

City
MODESTO

State
CA

Zip Code
95350-2845

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332708

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURPHY, JAMES, , ,

Mailing Address 1218 KINGFISH BLVD

City
CALABASH

State
NC

Zip Code
28467-4000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333053

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDIN

State
FL

Zip Code
34698-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.45

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332675

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDIN

State
FL

Zip Code
34698-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.45

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332688

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NAUGLE, MARVIN, , ,

Mailing Address 737 BRANDON CIR

City
LEBANON

State
MO

Zip Code
65536-5123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1113.42

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332765

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEMEYER, GREG, , ,

Mailing Address 7908 STANFORD

City
DALLASState
TXZip Code
75225-8210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE-HARALSONOccupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.75

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

Transaction ID : SA17.332682

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NORCOTT, WILLIAM, , ,

Mailing Address 96 JOSH GRAY RD

City
ROCKLANDState
MAZip Code
02370-1505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.85

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

Transaction ID : SA17.332897

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NORCOTT, WILLIAM, , ,

Mailing Address 96 JOSH GRAY RD

City
ROCKLANDState
MAZip Code
02370-1505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.85

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

Transaction ID : SA17.332898

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OBRIEN, HARVEY, , ,

Mailing Address 98BATES ST.

City
MILLINOCKET

State
ME

Zip Code
04462-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333011

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ODUM, FREIDA, , ,

Mailing Address 1 MYRTLEWOOD

City
SAVANNAH

State
GA

Zip Code
31405-1084

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333456

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OHLER, JOHN, , ,

Mailing Address 2589 SIBEL CIRCLE

City
LANSDALE

State
PA

Zip Code
19446-6078

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REMAX

Occupation (for Individual)
REALESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1036.05

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332891

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OHLER, JOHN, , ,

Mailing Address 2589 SIBEL CIRCLE

City
LANSDALE

State
PA

Zip Code
19446-6078

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REMAX

Occupation (for Individual)
REALESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1036.05

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333128

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333391

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333394

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333395

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333396

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333397

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OUMET, AL, , ,

Mailing Address 333 RANCHWOOD DRIVE

City
LEESBURG

State
FL

Zip Code
34748-8125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333468

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OVERBAY, TRAVIS, , ,

Mailing Address 410 EAST GUDGELL AVENUE

City
INDEPENDENCE

State
MO

Zip Code
64055-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SSC TECHNOLOGIES

Occupation (for Individual)
SOFTWARE SUPPORT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333567

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OVERBAY, TRAVIS, , ,

Mailing Address 410 EAST GUDGELL AVENUE

City
INDEPENDENCE

State
MO

Zip Code
64055-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SSC TECHNOLOGIES

Occupation (for Individual)
SOFTWARE SUPPORT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333568

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

45.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 444 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OVERBAY, TRAVIS, , ,

Mailing Address 410 EAST GUDGELL AVENUE

City
INDEPENDENCEState
MOZip Code
64055-1704FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SSC TECHNOLOGIESOccupation (for Individual)
SOFTWARE SUPPORT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333571

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAGE, RANDALL, , ,

Mailing Address 3204 ECHO VALLEY DRIVE

City
LITTLE ROCKState
ARZip Code
72227-3126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333519

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PAHL, JUDY, , ,

Mailing Address 2909 SOUTHEAST LAMBERT STREET

City
PORTLANDState
ORZip Code
97202-8859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

976.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333226

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333623

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERDUE, BLAIR, , ,

Mailing Address 4523 WALKER AVE

City
TOLEDO

State
OH

Zip Code
43612-2313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENERAL MOTORS

Occupation (for Individual)
INDUSTRIAL ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333273

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETERSEN, NINA, , ,

Mailing Address 41540 DRY GULCH ROAD

City
RICHLAND

State
OR

Zip Code
97870-6747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333595

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

315.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PETESCH, BRUCE, , ,

Mailing Address 2792 MOUNT VERNON HICKORY MOUNTAIN

City
SILER CITY

State
NC

Zip Code
27344-6612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332756

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLIPS, ROY, , ,

Mailing Address 3670 CLAIREMONT DR., STE.7

City
SAN DIEGO

State
CA

Zip Code
92117-5960

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PODIATRIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333578

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PITMAN, EDGAR, , ,

Mailing Address P.O. BOX 5248, 17360 RANCHO TEHAMA

City
CORNING

State
CA

Zip Code
96021-5248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333245

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 447 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEON

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332741

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLSTEIN, CAROLE, , ,

Mailing Address 863 STRATHMORE DR.

City
ORLANDO

State
FL

Zip Code
32803-6941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333291

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POPPE, LORI, , ,

Mailing Address P.O. BOX 1112

City
BAKER

State
MT

Zip Code
59313-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1386.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333496

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 448 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POZZI, ROBERT, , ,

Mailing Address 3733 FALSTONE ROAD

City
NORTH CHESTERFIELD

State
VA

Zip Code
23234-3769

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.30

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.332998

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRETZ, JEANIE, , ,

Mailing Address 700 WOODROW ST. APT 601

City
COLUMBIA

State
SC

Zip Code
29205-1772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.332758

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PREWITT, DENNIS, , ,

Mailing Address 1852 DAVIN DR.

City
GOSHEN

State
OH

Zip Code
45122-9733

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STV INCORPORATED

Occupation (for Individual)
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.70

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333535

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REED, ROGER, , ,

Mailing Address 3240 HWY 521 S.

City
SUMTERState
SCZip Code
29153-9125FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333162

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATERState
FLZip Code
33764-3724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332964

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICHEY, JOE, , ,

Mailing Address 4500 16ST

City
RACINEState
WIZip Code
53405-3110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333486

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

45.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROE, LARRY, , ,

Mailing Address 405 LAKESHORE DR.

City
LEXINGTON

State
KY

Zip Code
40502-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.15

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333528

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROE, MARY, , ,

Mailing Address 2038 WILSON ROAD

City
ASHEVILLE

State
NC

Zip Code
28806-9648

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DILLARDS LEGALSHIELD

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333209

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROGAN, CAROL, , ,

Mailing Address 1032 KARESH AVENUE

City
POMONA

State
CA

Zip Code
91767-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.10

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333105

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **ROGAN, CAROL, , ,**

Mailing Address 1032 KARESH AVENUE

City
POMONA

State
CA

Zip Code
91767-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333119

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **SABADIE, CARLOS, , ,**

Mailing Address 1641 VELA COVE

City
SLIDELL

State
LA

Zip Code
70458-6219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333069

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **SACKMAN, TINA, , ,**

Mailing Address 136 LIBRARY AVENUE

City
WARRENSBURG

State
NY

Zip Code
12885-1260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333025

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAPP, MARY, , ,

Mailing Address 1305 BERON DR.

City
METAIRIE

State
LA

Zip Code
70003-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.05

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.332836

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAPP, MARY, , ,

Mailing Address 1305 BERON DR.

City
METAIRIE

State
LA

Zip Code
70003-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.05

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.332837

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHAUMAN, LINDA, , ,

Mailing Address 1395 SOUTH 156TH COURT

City
OMAHA

State
NE

Zip Code
68130-4909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

410.22

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333086

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWARTZ, NANCY, , ,

Mailing Address 8602 E. 100TH PL.

City
TULSA

State
OK

Zip Code
74133-6281

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333360

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHORE, LYNN, , ,

Mailing Address P.O. BOX 6144

City

BATTLEMENT MESA

State

CO

Zip Code

81636-6144

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333254

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIEBER, SANDRA J, , ,

Mailing Address 5705 E COUNTY RD 600 N

City

MILAN

State

IN

Zip Code

47031-9456

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333385

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SKIPITIS, GREGORY, , ,

Mailing Address 2626 EDITH AVE SUITE B

City
REDDING

State
CA

Zip Code
96001-3056

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333459

Amount of Each Receipt this Period

125.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, WILLIAM E, , ,

Mailing Address 3615 S GALLOWAY DR.

City
MEMPHIS

State
TN

Zip Code
38111-6835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.50

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333393

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SORRELL, RONALD, , ,

Mailing Address 6576 HAMILTON LEBANON RD

City
MIDDLETOWN

State
OH

Zip Code
45044-9240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALLMASTERS

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333620

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SORRELL, RONALD, , ,

Mailing Address 6576 HAMILTON LEBANON RD

City
MIDDLETOWN

State
OH

Zip Code
45044-9240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALLMASTERS

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333621

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOUKUP, MA, , ,

Mailing Address 6 WOODCOCK LANE

City
LINCOLN

State
MA

Zip Code
01773-4513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333123

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPEED, RICHARD, , ,

Mailing Address 1807 PHEASANT

City
HERCULES

State
CA

Zip Code
94547-1632

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333030

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSING

State
ID

Zip Code
83639-5511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332858

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPROUSE, GARY, , ,

Mailing Address P.O. BOX 150432

City
ELY

State
NV

Zip Code
89315-0432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BLUE DIAMOND OIL CORP

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333167

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City
PACE

State
FL

Zip Code
32571-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

998.15

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333311

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333225

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STROUP, JUDIE, , ,

Mailing Address 858 GRAND HARBOUR W

City
MIRAMAR BEACH

State
FL

Zip Code
32550-4813

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333532

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TASSIN, JANE, , ,

Mailing Address 2222 WOODLAND DR.

City
OPELOUSAS

State
LA

Zip Code
70570-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.95

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333400

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

56.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TESAR, MICHAEL, , ,

Mailing Address 10 AURORA DRIVE

City
ROLLING HILLS ESTA

State
CA

Zip Code
90274-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1843.74

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333006

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, SHAJI, , ,

Mailing Address 2526 TERRA COTTA CIRCLE

City
HERNDON

State
VA

Zip Code
20171-4698

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333186

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.34

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.332775

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TURNER, KARLA, , ,

Mailing Address 5877 BIRCH BARK CIRCLE

City
GROVE CITY

State
OH

Zip Code
43123-8796

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332709

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TURNER, ROBERT, , ,

Mailing Address 2114 OAKWOOD DR.

City
CLUTE

State
TX

Zip Code
77531-2724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.332929

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TURNER, STEPHEN, , ,

Mailing Address 1036 TIMBERCREST DR.

City
PLEASANTON

State
TX

Zip Code
78064-1540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333157

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VANGJEL, PETER, , ,

Mailing Address 3752 PARKLAND DRIVE

City
ORLANDOState
FLZip Code
32814-6561FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332915

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VIERLING, DEBRA, , ,

Mailing Address 26088 STATE ROAD 46 W

City
BATESVILLEState
INZip Code
47006-9529FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332710

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATSON, STEPHEN, , ,

Mailing Address 9243 BARRINGTON CR.

City
MISSOURI CITYState
TXZip Code
77459-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

436.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.333362

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEISLER, ALLEN, , ,

Mailing Address 12855 W EL SUENO DR.

City
SUN CITY WESTState
AZZip Code
85375-2358FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	2	2

Transaction ID : SA17.333176

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, JERRY, , ,

Mailing Address 1920 SO 1ST ST

City
MINNEAPOLISState
MNZip Code
55454-1055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF MINNEAPOLISOccupation (for Individual)
FIREFIGHTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	2	2

Transaction ID : SA17.333423

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAKState
AKZip Code
99567-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	2	2

Transaction ID : SA17.333633

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITEMAN, KEITH, , ,

Mailing Address 2671 DAISY LANE

City
FALLBROOK

State
CA

Zip Code
92028-9591

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.20

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333480

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WIERL, TAMMY, , ,

Mailing Address 4021 WOID RIVER DR. # 1412

City
CORPUS CHRISTI

State
TX

Zip Code
78410-5661

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALMART

Occupation (for Individual)
RETAILER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333382

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, SARAH, , ,

Mailing Address 1800 EL PASEO #2016

City
HOUSTON

State
TX

Zip Code
77054-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GARDEN TERRACE NURSING HE

Occupation (for Individual)
REGISTERED DIETITIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333418

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILSON, JEAN, , ,

Mailing Address 5644 ARAL DRIVE

City
LAKELAND

State
FL

Zip Code
33805-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.71

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333309

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, JEAN, , ,

Mailing Address 5644 ARAL DRIVE

City
LAKELAND

State
FL

Zip Code
33805-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.71

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333434

Amount of Each Receipt this Period

7.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINKLER, DONALD, , ,

Mailing Address 13703 SE LOST LITTLE DR.

City
PRINEVILLE

State
OR

Zip Code
97754-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

783.45

Date of Receipt

08 / **31** / **2022**

Transaction ID : SA17.333569

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WRIGHT, KARRIE, , ,

Mailing Address 14 E 75 ST. APT 7E

City
NEW YORK

State
NY

Zip Code
10021-2625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333260

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, MICHAEL, , ,

Mailing Address 18814 N 51ST DR.

City
GLENDALE

State
AZ

Zip Code
85308-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333320

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIGHT, MICHAEL, , ,

Mailing Address 18814 N 51ST DR.

City
GLENDALE

State
AZ

Zip Code
85308-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333514

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 465 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YOUNG, CLAY, , ,

Mailing Address W310 3RD AVE

City

KETTLE FALLS

State

WA

Zip Code

99141-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

C21

Occupation (for Individual)

REALTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.01

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333543

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUNG, CLAY, , ,

Mailing Address W310 3RD AVE

City

KETTLE FALLS

State

WA

Zip Code

99141-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

C21

Occupation (for Individual)

REALTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.01

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333593

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNG, JAMES, , ,

Mailing Address 2207 RIDGEWAY ST.

City

ARDMORE

State

OK

Zip Code

73401-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

2640.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2022

Transaction ID : SA17.333132

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

1150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YTURALDE, CHRISTINA, , ,

Mailing Address 325 E. FIFTH STREET

City
CALEXICO

State
CA

Zip Code
92231-2765

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333654

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YTURALDE, CHRISTINA, , ,

Mailing Address 325 E. FIFTH STREET

City
CALEXICO

State
CA

Zip Code
92231-2765

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.40

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333656

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZAREMBO, CATHERINE, , ,

Mailing Address 49 WHITMAN ROAD

City
MADISON

State
CT

Zip Code
06443-1885

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 31 / 2022

Transaction ID : SA17.333246

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLEState
MIZip Code
49418-2259FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2022

Transaction ID : SA17.332658

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION

Mailing Address 8700 WEST BRYN MAWR AVENUE
SUITE 1200SCity
CHICAGOState
ILZip Code
60631-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333678

Amount of Each Receipt this Period

400000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333681

Amount of Each Receipt this Period

1085.78

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400010.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333755

Amount of Each Receipt this Period

0.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333756

Amount of Each Receipt this Period

0.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333757

Amount of Each Receipt this Period

3.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

4.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333759

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333760

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333761

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 470 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333762

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333891

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOLINGER, REBA, , ,

Mailing Address 543 W 6TH ST

City
LITITZ

State
PA

Zip Code
17543-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.70

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333853

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334074

Amount of Each Receipt this Period

0.20

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEWState
DEZip Code
19970-4524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333839

Amount of Each Receipt this Period

0.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTONState
OHZip Code
45383-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333683

Amount of Each Receipt this Period

0.20

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 472 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333684

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333686

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334187

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURLOCK JR, RALPH C, , ,

Mailing Address 1690 KAMSACK DR.

City
SUNNYVALE

State
CA

Zip Code
94087-5214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.70

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334222

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARMANY, RAFAEL, , ,

Mailing Address 2410 E. CARTER AVE.

City
FRESNO

State
CA

Zip Code
93730-4753

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
RECORDING ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.35

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334086

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334343

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 474 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334344

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334345

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334346

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 475 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CURL, RICHARD, , ,

Mailing Address 6 QUAIL LAKE RD E

City
PINEHURST

State
NC

Zip Code
28374-8338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334126

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUERST, JOHN, , ,

Mailing Address 13512 DOERFLER ROAD SOUTHEAST

City
SILVERTON

State
OR

Zip Code
97381-9212

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.333813

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUERST, JOHN, , ,

Mailing Address 13512 DOERFLER ROAD SOUTHEAST

City
SILVERTON

State
OR

Zip Code
97381-9212

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

985.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.333824

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 476 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGEState
NJZip Code
08514-2515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.13

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.334289

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.333900

Amount of Each Receipt this Period

1.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.333901

Amount of Each Receipt this Period

1.80

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 477 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333903

Amount of Each Receipt this Period

10.11

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333905

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FABRETTI, RONALD, , ,

Mailing Address 1205 HONEOYE FALLS FIVE PT RD

City
HONEOYE FALLSState
NYZip Code
14472-9046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GETINGE ABOccupation (for Individual)
SERVICE TECH II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334010

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

10.43

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **FRIEDMAN, LUCILLE, , ,**

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334101

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **GATTI, PATRICIA, , ,**

Mailing Address 1706 EAST 52ND STREET

City
BROOKLYN

State
NY

Zip Code
11234-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334174

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **GATTI, PATRICIA, , ,**

Mailing Address 1706 EAST 52ND STREET

City
BROOKLYN

State
NY

Zip Code
11234-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1320.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334189

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 479 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORDON, RON, , ,

Mailing Address 913 ANTLER MEADOW WAY

City
FUQUAY VARINA

State
NC

Zip Code
27526-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.333961

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334037

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWES, ALVIN, , ,

Mailing Address 1841 ARBOR KNOLL LOOP

City
TRINITY

State
FL

Zip Code
34655-7205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.333970

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 480 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOWES, ALVIN, , ,

Mailing Address 1841 ARBOR KNOLL LOOP

City
TRINITY

State
FL

Zip Code
34655-7205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.75

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.333972

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JAMES, JERRY, , ,

Mailing Address 409-42 AVE.

City
GREELEY

State
CO

Zip Code
80634-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
O-I

Occupation (for Individual)
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.90

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.333983

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.333705

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.333706

Amount of Each Receipt this Period

6.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.333708

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.333709

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333710

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333711

Amount of Each Receipt this Period

0.45

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333712

Amount of Each Receipt this Period

0.45

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

13.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334197

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAND, NANCY, , ,

Mailing Address 34 COPENHAGEN AVE

City
PUNTA GORDA

State
FL

Zip Code
33950-7316

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.45

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334284

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAND, NANCY, , ,

Mailing Address 34 COPENHAGEN AVE

City
PUNTA GORDA

State
FL

Zip Code
33950-7316

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

277.45

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334286

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAWRENCE, MARJORIE, , ,

Mailing Address 2224 CRAIG DRIVE

City
CONCORD

State
CA

Zip Code
94518-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.333748

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LENGEL, MARY, , ,

Mailing Address 8092 NORTH UNION CITY ROAD

City
DENVER

State
IN

Zip Code
46926-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALMART

Occupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334443

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LENGEL, MARY, , ,

Mailing Address 8092 NORTH UNION CITY ROAD

City
DENVER

State
IN

Zip Code
46926-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALMART

Occupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

341.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334444

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LENGEL, MARY, , ,

Mailing Address 8092 NORTH UNION CITY ROAD

City
DENVER

State
IN

Zip Code
46926-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALMART

Occupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.80

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334445

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334427

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIER

State
CA

Zip Code
90605-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

595.75

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333690

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIER

State
CA

Zip Code
90605-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333691

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIER

State
CA

Zip Code
90605-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333692

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIER

State
CA

Zip Code
90605-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

595.75

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333693

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 487 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333859

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333860

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333861

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

10.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDIN

State
FL

Zip Code
34698-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334209

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDIN

State
FL

Zip Code
34698-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334210

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, FRED, , ,

Mailing Address 74 FULLER POND ROAD

City
MIDDLETON

State
MA

Zip Code
01949-2508

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

652.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.333974

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 489 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ODOTERLUND, JENNY, , ,

Mailing Address 704 RIVER OVERLOOK

City
FORSYTHState
GAZip Code
31029-4895FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334188

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PARTRIDGE, LINDA, , ,

Mailing Address 120 OFALLON PLAZA

City
O FALLONState
MOZip Code
63366-2613FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARTRIDGE COUNSELINGOccupation (for Individual)
COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334091

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PICATTI SMITH, BETTI JO, , ,

Mailing Address 2002 SO 89TH AVE

City
YAKIMAState
WAZip Code
98903-9283FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334228

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEON

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.333697

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POPPE, LORI, , ,

Mailing Address P.O. BOX 1112

City
BAKER

State
MT

Zip Code
59313-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1386.70

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334005

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROWELL, DARLENE, , ,

Mailing Address 2743 NORTHWEST 18TH STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73107-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

284.55

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334140

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANDERS, DAVE, , ,

Mailing Address 7834NM206

City
PORTALESState
NMZip Code
88130-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334391

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAPP, MARY, , ,

Mailing Address 1305 BERON DR.

City
METAIRIEState
LAZip Code
70003-5513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333720

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAPP, MARY, , ,

Mailing Address 1305 BERON DR.

City
METAIRIEState
LAZip Code
70003-5513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

903.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333725

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTON

State
WA

Zip Code
98058-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334422

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTON

State
WA

Zip Code
98058-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334423

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, GARLAND, , ,

Mailing Address 585 FOXDALE LOOP W

City
SOUTHAVEN

State
MS

Zip Code
38672-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

291.43

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334092

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOWState
VAZip Code
20136-2532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334313

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRAUSS, ROBERT, , ,

Mailing Address 8023 LAKEFOREST

City
SAN ANTONIOState
TXZip Code
78239-3506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334203

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACHState
CAZip Code
92660-7120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334103

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 494 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VASQUEZ, RANDOLPH, , ,

Mailing Address 1010 KEENE DRIVE

City
LA HABRAState
CAZip Code
90631-7150FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333687

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAKState
AKZip Code
99567-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333688

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAKState
AKZip Code
99567-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.333906

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.45

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANEZ, OLGA, , ,

Mailing Address 9655 CAMERON ST

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.90

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.334179

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YANEZ, OLGA, , ,

Mailing Address 9655 CAMERON ST

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.90

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.334185

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

09 / **01** / **2022**

Transaction ID : SA17.334446

Amount of Each Receipt this Period

25058.98

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 496 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ABBE, ROSS, , ,

Mailing Address 2721 VICTOR ST

City
BELLINGHAM

State
WA

Zip Code
98225-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

927.20

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334471

Amount of Each Receipt this Period

110.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ABBE, ROSS, , ,

Mailing Address 2721 VICTOR ST

City
BELLINGHAM

State
WA

Zip Code
98225-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

927.20

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334472

Amount of Each Receipt this Period

110.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ABBE, ROSS, , ,

Mailing Address 2721 VICTOR ST

City
BELLINGHAM

State
WA

Zip Code
98225-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

927.20

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334473

Amount of Each Receipt this Period

11.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

231.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 497 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLEState
TXZip Code
76034-7202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334536

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDSState
MIZip Code
49515-0671FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334512

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNEState
TXZip Code
76033-6246FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

537.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334707

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

90.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 498 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, MARY, , ,

Mailing Address 808 PRAIRIE AVE

City
CLEBURNE

State
TX

Zip Code
76033-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.40

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334708

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARMSTRONG, ERNESTINE, , ,

Mailing Address 4152 LAWHON CT,

City
TUCKER

State
GA

Zip Code
30084-6452

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.90

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334642

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BANGERT, MARILYN, , ,

Mailing Address 8713 US HWY 85

City
FORT LUPTON

State
CO

Zip Code
80621-9309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334843

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BANGERT, MARILYN, , ,

Mailing Address 8713 US HWY 85

City
FORT LUPTON

State
CO

Zip Code
80621-9309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334845

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BANGERT, MARILYN, , ,

Mailing Address 8713 US HWY 85

City
FORT LUPTON

State
CO

Zip Code
80621-9309

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334846

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334578

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.350578

Amount of Each Receipt this Period

– 75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BELMONTE, JEAN, , ,

Mailing Address 613 CUSTIS ROAD

City
GLENSIDE

State
PA

Zip Code
19038-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334743

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BERNHARDT, ROSALEE, , ,

Mailing Address 2157 NORTHEAST KIM LANE

City
BEND

State
OR

Zip Code
97701-6054

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REALTOR/PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334832

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 501 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334849

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUNETTO, MARYLOU, , ,

Mailing Address 111 BURTON STREET

City
JOHNSTOWN

State
NY

Zip Code
12095-2026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334841

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRYANT, MARK, , ,

Mailing Address 105 BAYBERRY COURT

City
SHALLOTTE

State
NC

Zip Code
28470-4417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GPM INVESTMENT, LLC

Occupation (for Individual)
SALES ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334517

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 502 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BUERGER, LELIA T, , ,**

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTONState
TXZip Code
77079-3182FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.334639

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **BURGESS, BARBARA, , ,**

Mailing Address 3177 CHERRY MEADOW PATH

City
LEXINGTONState
KYZip Code
40509-8547FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.55

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.334559

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **CARMONA, FRANK, , ,**

Mailing Address 14854 DAYTONA COURT

City
WOODBIDGEState
VAZip Code
22193-1929FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

241.90

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.334779

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 503 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAVANAUGH, LYNN, , ,

Mailing Address 7800 LOMA VISTA DRIVE

City
AMARILLOState
TXZip Code
79108-2718FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334494

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRAIG, DENISE, , ,

Mailing Address 2855 SPRING LAKE ROAD SOUTHWEST

City
PRIOR LAKEState
MNZip Code
55372-2338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3650.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334745

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CUNNINGHAM, RONALD, , ,

Mailing Address 4358 E 58TH ST

City
TULSAState
OKZip Code
74135-4200FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN ELECTRIC POWEROccupation (for Individual)
IT ENTERPRISE ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334641

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

305.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 504 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DALE, ANNEMARIE, , ,

Mailing Address 2623 ESPINOZA STREET

City
TRINIDADState
COZip Code
81082-3936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334795

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEMPSEY, ANN, , ,

Mailing Address 1201 RESERVE LANE

City

ST. SIMONS ISLAND

State
GAZip Code
31522-1997FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BHHS HODNETT COOPEROccupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334466

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DENDY, PHYLLIS, , ,

Mailing Address 1808 N. AVENUE H

City

HASKELL

State
TXZip Code
79521-3018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334597

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 505 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIAZ, ZOILA, , ,

Mailing Address 1430 SOUTHWEST 15TH STREET

City
MIAMI

State
FL

Zip Code
33145-1506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334491

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUGGAN, DONNA, , ,

Mailing Address 213-02 73RD AVE

City

OAKLAND GARDENS

State

NY

Zip Code

11364-2859

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334601

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City

SARATOGA

State

WY

Zip Code

82331-0399

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334543

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 506 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGAState
WYZip Code
82331-0399FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334564

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ECHOLS, DON, , ,

Mailing Address 3461 JERROLD BOULEVARD

City
BRUNSWICKState
OHZip Code
44212-2225FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334593

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334718

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

79.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 507 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334719

Amount of Each Receipt this Period

22.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EVERETT, WILLIAM, , ,

Mailing Address 107 WOODBURN DRIVE

City
HAMPTONState
VAZip Code
23664-1866FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2007.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334590

Amount of Each Receipt this Period

65.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FERROVECCHIO, MARY, , ,

Mailing Address 18 DAY ROAD

City
ARMONKState
NYZip Code
10504-2406FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334691

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

147.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 508 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334492

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GALE, CHERYL, , ,

Mailing Address P.O. BOX 475, 30 LAURIE HILL ROAD

City
REVEREState
PAZip Code
18953-0475FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334508

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GALE, CHERYL, , ,

Mailing Address P.O. BOX 475, 30 LAURIE HILL ROAD

City
REVEREState
PAZip Code
18953-0475FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334510

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

190.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 509 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GALE, CHERYL, , ,

Mailing Address P.O. BOX 475, 30 LAURIE HILL ROAD

City
REVERE

State
PA

Zip Code
18953-0475

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334511

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GANDARA, DOLORES, , ,

Mailing Address 350 WOOD LANE

City
CORVALLIS

State
MT

Zip Code
59828-9556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334803

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARLAND, GREG, , ,

Mailing Address 1600 POST OAK BLVD

City
HOUSTON

State
TX

Zip Code
77056-2900

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PHILLIPS 66

Occupation (for Individual)
EXEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334727

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

10135.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 510 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GENTY, RICHARD, , ,

Mailing Address 11641 BUCKHORN ROAD

City
CHESTERFIELD

State
VA

Zip Code
23838-2908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NTS

Occupation (for Individual)
COMPUTER SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.50

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334461

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334742

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOLDMAN, FRED, , ,

Mailing Address 7433 HADDINGTON CV

City
LAKEWOOD RANCH

State
FL

Zip Code
34202-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334637

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 511 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORDON, LOUISE, , ,

Mailing Address 4075 BROOKS MILL DRIVE

City
LITHONIA

State
GA

Zip Code
30038-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.97

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334784

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GORDON, RON, , ,

Mailing Address 913 ANTLER MEADOW WAY

City

FUQUAY VARINA

State
NC

Zip Code
27526-4849

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.50

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334583

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City

MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334643

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 512 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334644

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUNTER, KENNETH, , ,

Mailing Address 10211MCKINLEY AVE E

City
TACOMA

State
WA

Zip Code
98445-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334836

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334710

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 513 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HANSON, SHERRY M., , ,

Mailing Address 3000 N. PORTAGE AVENUE

City
GRAYLING

State
MI

Zip Code
49738-8500

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334530

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOGAN, DORIS, , ,

Mailing Address 224 COUNTY ROAD 517

City
HANCEVILLE

State
AL

Zip Code
35077-3836

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.43

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334520

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334587

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 514 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334824

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334831

Amount of Each Receipt this Period

21.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. INGALSBE, NOALEEN, , ,

Mailing Address 4 BEAVER RUN SW, ROME, GA

City
ROME

State
GA

Zip Code
30165-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

933.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334565

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 515 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. INGALSBE, NOALEEN, , ,

Mailing Address 4 BEAVER RUN SW, ROME, GA

City
ROMEState
GAZip Code
30165-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

933.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334567

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. INGALSBE, NOALEEN, , ,

Mailing Address 4 BEAVER RUN SW, ROME, GA

City
ROMEState
GAZip Code
30165-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

933.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334570

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. INGALSBE, NOALEEN, , ,

Mailing Address 4 BEAVER RUN SW, ROME, GA

City
ROMEState
GAZip Code
30165-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

933.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334571

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JEANNETTE, PADILLA, , ,

Mailing Address 423 AVENIDA GRANADA-70

City
SAN CLEMENTE

State
CA

Zip Code
92672-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334866

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, RUSSELL, , ,

Mailing Address 6408 VERGIL LANE

City
ORLANDO

State
FL

Zip Code
32809-5906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334694

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANIUS, BARBARA, , ,

Mailing Address 12662 HARRIET CIRCLE

City
DALLAS

State
TX

Zip Code
75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334697

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 517 OF 1424

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEGATE, DAVID, , ,

Mailing Address 21503 MILLHOUSE CIRCLE

City
HOUSTONState
TXZip Code
77073-1549FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALORICAOccupation (for Individual)
CUSTOMER SVC OPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334829

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LITRELL, LINDA, , ,

Mailing Address 216 HEATHER COURT

City
FLORENCEState
ALZip Code
35630-1489FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334547

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LULA, MARY LOUISE, , ,

Mailing Address 2034 CROGHAN DRIVE

City
CARNEGIEState
PAZip Code
15106-1593FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334505

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 518 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENAState
TXZip Code
76655-3038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334825

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENAState
TXZip Code
76655-3038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334826

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENAState
TXZip Code
76655-3038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334827

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

85.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 519 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334828

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334649

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334650

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 520 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTINState
TXZip Code
78752-4123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334651

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTINState
TXZip Code
78752-4123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334654

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTINState
TXZip Code
78752-4123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334655

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 521 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334857

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCBRIDE, JAMES, , ,

Mailing Address 58 HIGH RIDGE ROAD

City
NORWAY

State
ME

Zip Code
04268-4882

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334751

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCANN, WILLIAM, , ,

Mailing Address 12909 EAST CASTRO STREET

City
DEWEY

State
AZ

Zip Code
86327-8285

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

526.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334679

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 522 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEAGHER, STACY, , ,

Mailing Address 1 OAK HOLLOW CT.

City
YUBA CITYState
CAZip Code
95991-6273FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334859

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIMMS, JOY, , ,

Mailing Address 8303 NORFOLK DR.

City
AMARILLOState
TXZip Code
79119-6442FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334704

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINDERHOUT, CHARLES, , ,

Mailing Address OGLESBY AVENUE

City
HOMEWOODState
ALZip Code
35209-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334640

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

100.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 523 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334589

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLLOY, PATRICK J, , ,

Mailing Address 1175 WIONNA AVE

City
CINCINNATI

State
OH

Zip Code
45224-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334713

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOON, KAREN MARIE, , ,

Mailing Address 35490 CAMP CREEK ROAD

City
SPRINGFIELD

State
OR

Zip Code
97478-8772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334575

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

105.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 524 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MORAN, FRANK, , ,

Mailing Address P.O. BOX 4848

City
SHREVEPORTState
LAZip Code
71134-0848FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334514

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURPHY, PATRICK, , ,

Mailing Address 118 WEST VIRGINIA ST APT7

City
ELMHURSTState
ILZip Code
60126-3345FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABLE ENGINEERING SERVICESOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334686

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURPHY, PATRICK, , ,

Mailing Address 118 WEST VIRGINIA ST APT7

City
ELMHURSTState
ILZip Code
60126-3345FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABLE ENGINEERING SERVICESOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

834.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334687

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 525 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURPHY, PATRICK, , ,

Mailing Address 118 WEST VIRGINIA ST APT7

City
ELMHURSTState
ILZip Code
60126-3345FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABLE ENGINEERING SERVICESOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334688

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURPHY, PATRICK, , ,

Mailing Address 118 WEST VIRGINIA ST APT7

City
ELMHURSTState
ILZip Code
60126-3345FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABLE ENGINEERING SERVICESOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334689

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEAL, ROLLIE, , ,

Mailing Address 17 LARKSPUR LN

City
CLARKSBURGState
WVZip Code
26301-6871FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334525

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NEVINS, LEIGH ANNE, , ,

Mailing Address 6378 EASTWOOD GLEN PLACE

City
MONTGOMERY

State
AL

Zip Code
36117-4709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.55

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334506

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NICKLESS, SHARON, , ,

Mailing Address 2589 SPENCER CREEK RD

City
CAMDENTON

State
MO

Zip Code
65020-8314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.45

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334516

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICKLESS, SHARON, , ,

Mailing Address 2589 SPENCER CREEK RD

City
CAMDENTON

State
MO

Zip Code
65020-8314

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1510.45

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334524

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 527 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NICKLESS, SHARON, , ,

Mailing Address 2589 SPENCER CREEK RD

City
CAMDENTONState
MOZip Code
65020-8314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334537

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NICKLESS, SHARON, , ,

Mailing Address 2589 SPENCER CREEK RD

City
CAMDENTONState
MOZip Code
65020-8314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334728

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NORCOTT, WILLIAM, , ,

Mailing Address 96 JOSH GRAY RD

City
ROCKLANDState
MAZip Code
02370-1505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334467

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

80.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NORTON, NORMAN, , ,

Mailing Address 7 HADLEY CT.

City

BASKING RIDGE

State

NJ

Zip Code

07920-4901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PERFUSION RESOURCES, PC

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.35

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334749

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSTER, MARLENE, , ,

Mailing Address 2859 DAISYBROOK ST NW

City

NORTH CANTON

State

OH

Zip Code

44720-8168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

OSTER ENTERPRISES

Occupation (for Individual)

OFFICE MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.02

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334674

Amount of Each Receipt this Period

30.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City

FLEMING

State

OH

Zip Code

45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

413.40

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334773

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 529 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEIPPO, RAIJA, , ,

Mailing Address 3217 BELLE AVENUE

City
DENISONState
TXZip Code
75020-7356FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.15

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.334667

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETESCH, BRUCE, , ,

Mailing Address 2792 MOUNT VERNON HICKORY MOUNTAIN

City
SILER CITYState
NCZip Code
27344-6612FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.45

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.334489

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEONOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Transaction ID : SA17.334463

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 530 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POOL, DONALD, , ,

Mailing Address 10429 SALINAS RIVER CIRCLE

City
FOUNTAIN VALLEY

State
CA

Zip Code
92708-6841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334606

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POOL, DONALD, , ,

Mailing Address 10429 SALINAS RIVER CIRCLE

City
FOUNTAIN VALLEY

State
CA

Zip Code
92708-6841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334716

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PRESTON, BRADLEY, , ,

Mailing Address 2109 SOMMER STREET

City
NAPA

State
CA

Zip Code
94559-4306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

244.57

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334792

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 531 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PRESTON, BRADLEY, , ,

Mailing Address 2109 SOMMER STREET

City
NAPAState
CAZip Code
94559-4306FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334793

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUPERT, EARL, , ,

Mailing Address 4185 WINIFRED STREET

City
WAYNEState
MIZip Code
48184-2205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEAUMONTOccupation (for Individual)
NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334475

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAPP, MARY, , ,

Mailing Address 1305 BERON DR.

City
METAIRIEState
LAZip Code
70003-5513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

903.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334487

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

120.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 532 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAUCIER, SUSAN, , ,

Mailing Address 4117 BALLAHACK ROAD

City
CHESAPEAKEState
VAZip Code
23322-3220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HILLIER ENTERPRISESOccupation (for Individual)
ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2022

Transaction ID : SA17.334452

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHUBERT, JIRI, , ,

Mailing Address 170 SMITH RD

City
MERRITT ISLANDState
FLZip Code
32953-8326FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2022

Transaction ID : SA17.334794

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEAMAN, CAROLYN, , ,

Mailing Address 10594 ALLCHIN RD

City
FENWICKState
MIZip Code
48834-9707FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2022

Transaction ID : SA17.334488

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1040.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHOOK, JOHN L, , ,

Mailing Address 927 CHELTENHAM WAY

City
AVON

State
IN

Zip Code
46123-4139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
L.H. EXPRESS, LLC

Occupation (for Individual)
DIRECTOR OF SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.85

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334485

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHOOK, JOHN L, , ,

Mailing Address 927 CHELTENHAM WAY

City
AVON

State
IN

Zip Code
46123-4139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
L.H. EXPRESS, LLC

Occupation (for Individual)
DIRECTOR OF SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.85

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334486

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SILVERNALE, LYNN, , ,

Mailing Address 17 QUIET CREEK

City
FLORENCE

State
KY

Zip Code
41042-8858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

321.80

Date of Receipt

09 / 01 / 2022

Transaction ID : SA17.334490

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 534 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, DOUGLAS, , ,

Mailing Address 337 RILYN DRIVE

City
WEST PALM BEACH

State
FL

Zip Code
33405-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DA SMITH CONSTRUCTION LLC

Occupation (for Individual)
GC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334618

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, THOMAS, , ,

Mailing Address 736 BEAVER STREET

City
SEWICKLEY

State
PA

Zip Code
15143-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334566

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334842

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

90.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STOLL, SANDRA, , ,

Mailing Address 110CR 3694

City
SPRINGTOWN

State
TX

Zip Code
76082-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334455

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334460

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TOWNSEND, FREDERICK, , ,

Mailing Address 1907 SOUTH LE HOMME DIEU DRIVE NOR

City
ALEXANDRIA

State
MN

Zip Code
56308-8577

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SANFORD HEALTH

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA17.334839

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 536 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROMMETER, PATRICIA, , ,

Mailing Address 17583 CR 41.1

City
BONCARBOState
COZip Code
81024-2022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334722

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WAGSTAFF, BERTA, , ,

Mailing Address PI BOX 66775

City
ALBUQUERQUEState
NMZip Code
87193-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CIVILIAN ARMED FORCES REAL ESTATE SERVOccupation (for Individual)
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334458

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WAGSTAFF, BERTA, , ,

Mailing Address PI BOX 66775

City
ALBUQUERQUEState
NMZip Code
87193-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CIVILIAN ARMED FORCES REAL ESTATE SERVOccupation (for Individual)
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334871

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1075.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 537 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WASSON, MARIAN, , ,

Mailing Address 1620 BUCKLEVEL RD

City
GREENWOODState
SCZip Code
29649-9755FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334802

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAKState
AKZip Code
99567-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334816

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, SARAH, , ,

Mailing Address 1800 EL PASEO #2016

City
HOUSTONState
TXZip Code
77054-3016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GARDEN TERRACE NURSING HEOccupation (for Individual)
REGISTERED DIETITIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334668

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

70.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 538 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILSON, MARILYN R, , ,

Mailing Address P.O. BOX 235

City
HAINESState
AKZip Code
99827-0235FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2022

Transaction ID : SA17.334451

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.334876

Amount of Each Receipt this Period

2642.79

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALLISON, SHIRLEY, , ,

Mailing Address 2304 JUANITA AVENUE

City
SAN ANGELOState
TXZip Code
76901-1414FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1044.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335170

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 539 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ARWOOD, JOHN, , ,

Mailing Address 13255LANIERROAD

City
JACKSONVILLE

State
FL

Zip Code
32226-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335512

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTA

State
FL

Zip Code
34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335516

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTA

State
FL

Zip Code
34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335518

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 540 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTA

State
FL

Zip Code
34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.335521

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BABCOCK, PAUL, , ,

Mailing Address P.O. BOX 661

City
SAG HARBOR

State
NY

Zip Code
11963-0017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PROP MNGMNT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.335559

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.335318

Amount of Each Receipt this Period

0.60

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

1.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335323

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335327

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335329

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

2.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCHP

City
SIERRA VISTA

State
AZ

Zip Code
85635-5065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334905

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BERSAGLIERI, RONALD, , ,

Mailing Address 6783 CHELTON DRIVE

City
OAKLAND

State
CA

Zip Code
94611-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334879

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BERSAGLIERI, RONALD, , ,

Mailing Address 6783 CHELTON DRIVE

City
OAKLAND

State
CA

Zip Code
94611-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

251.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334880

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 543 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOBEE, THOMAS. G. , ,

Mailing Address 8167 GARY AVE

City
WESTLAND

State
MI

Zip Code
48185-7083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335236

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOGATIN, WAYNE, , ,

Mailing Address 13776 COUNTY ROAD 1

City
LONGMONT

State
CO

Zip Code
80504-9632

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335363

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335444

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

MM / DD / YYYY
09 / 02 / 2022

Transaction ID : SA17.335484

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

MM / DD / YYYY
09 / 02 / 2022

Transaction ID : SA17.335485

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

509.50

Date of Receipt

MM / DD / YYYY
09 / 02 / 2022

Transaction ID : SA17.335487

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335488

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335489

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335492

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

51.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 546 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGASState
NVZip Code
89117-5858FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335493

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRACHFELD, DONALD, , ,

Mailing Address 25 FOUR SEASONS DRIVE

City
NORTH CALDWELLState
NJZip Code
07006-6134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335809

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, EARL M, , ,

Mailing Address 8928 WEST OAK LANE

City
LAKE CITYState
MIZip Code
49651-8042FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

470.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335695

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334919

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMAN

State
SC

Zip Code
29349-5600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335450

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334994

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334995

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334997

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334998

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 549 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.334999

Amount of Each Receipt this Period

17.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335000

Amount of Each Receipt this Period

17.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335577

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

39.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 550 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335579

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335581

Amount of Each Receipt this Period

2.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335582

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

22.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 551 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335583

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335584

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRAIG, DENISE, , ,

Mailing Address 2855 SPRING LAKE ROAD SOUTHWEST

City
PRIOR LAKE

State
MN

Zip Code
55372-2338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3650.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335744

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 552 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CROW, DAVID, , ,

Mailing Address 4010 RAVENSWAY COURT

City
PEARLAND

State
TX

Zip Code
77584-7780

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.70

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335135

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLENBART, GLEN, , ,

Mailing Address 3358 BARGAINTOWN ROAD

City

EGG HARBOR TOWNSHI

State

NJ

Zip Code

08234-9638

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.35

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335265

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City

STUART

State

FL

Zip Code

34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335381

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 553 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335383

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335385

Amount of Each Receipt this Period

10.11

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335388

Amount of Each Receipt this Period

0.13

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 554 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335544

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335545

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335551

Amount of Each Receipt this Period

5.75

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 555 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335554

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ESSOE, RAMONA, , ,

Mailing Address N33W29231

City
PEWAUKEEState
WIZip Code
53072-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335772

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACHState
FLZip Code
33408-1952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335771

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 556 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORDON, LOUISE, , ,

Mailing Address 4075 BROOKS MILL DRIVE

City
LITHONIAState
GAZip Code
30038-4143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335067

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUERRERO, ESTRELLA, , ,

Mailing Address 3404 LAKE PARK AVENUE

City
FALLBROOKState
CAZip Code
92028-7852FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335205

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLAState
NYZip Code
11501-3423FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335618

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

2.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 557 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335620

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335735

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335736

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 558 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLAState
NYZip Code
11501-3423FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335738

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELDState
CTZip Code
06759-2809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335386

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONTState
ILZip Code
61568-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335602

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 559 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEUSSER, SYDNEY, , ,

Mailing Address P. I. BOX1658

City
DAWSONVILLE

State
GA

Zip Code
30534-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335428

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOFELD, BRIAN, , ,

Mailing Address 6199 WEST HOLLILYNN DRIVE

City
BOISE

State
ID

Zip Code
83709-7236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335845

Amount of Each Receipt this Period

70.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOFELD, BRIAN, , ,

Mailing Address 6199 WEST HOLLILYNN DRIVE

City
BOISE

State
ID

Zip Code
83709-7236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

571.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335846

Amount of Each Receipt this Period

0.70

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

71.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLBEN, MELVIN, , ,

Mailing Address 407 KATIELEE COVE, DALLAS, GA 3013

City
DALLAS

State
GA

Zip Code
13032-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335342

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAUR, JASLEEN, , ,

Mailing Address 44301 HUNTER TERRACE

City
FREMONT

State
CA

Zip Code
94539-3223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEG MICRO

Occupation (for Individual)
HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335412

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335829

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7.60

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335830

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335831

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KINER, JAIMEE, , ,

Mailing Address 20225 EYOTA COURT

City
APPLE VALLEYState
CAZip Code
92308-6201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

266.25

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335020

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

13.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 562 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335604

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335607

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335616

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335617

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335619

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335621

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

24.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 564 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KNOLL, CHARLIE, , ,

Mailing Address 929 MILLSHORE DR.

City
OVIEDO

State
FL

Zip Code
32766-9312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
DRAFTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335029

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335866

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335867

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 565 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335868

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335869

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335870

Amount of Each Receipt this Period

6.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

26.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335871

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335872

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNA

State
MN

Zip Code
55060-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.85

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.334912

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 567 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNAState
MNZip Code
55060-3105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.334913

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNAState
MNZip Code
55060-3105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.334914

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANGOLD, MARIE, , ,

Mailing Address 5101 239TH PL SW

City
MOUNTLAKE TERRACEState
WAZip Code
98043-5624FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335294

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANGOLD, MARIE, , ,

Mailing Address 5101 239TH PL SW

City
MOUNTLAKE TERRACEState
WAZip Code
98043-5624FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.90

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335295

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACHState
FLZip Code
32168-7940FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335378

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACHState
FLZip Code
32168-7940FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335799

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 569 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIMMS, JOY, , ,

Mailing Address 8303 NORFOLK DR.

City
AMARILLOState
TXZip Code
79119-6442FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335580

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIMMS, JOY, , ,

Mailing Address 8303 NORFOLK DR.

City
AMARILLOState
TXZip Code
79119-6442FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335587

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIMMS, JOY, , ,

Mailing Address 8303 NORFOLK DR.

City
AMARILLOState
TXZip Code
79119-6442FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335588

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

4.30

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 570 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335707

Amount of Each Receipt this Period

1.80

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335710

Amount of Each Receipt this Period

4.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335713

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEMEYER, GREG, , ,

Mailing Address 7908 STANFORD

City
DALLAS

State
TX

Zip Code
75225-8210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE-HARALSON

Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335430

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAHL, JUDY, , ,

Mailing Address 2909 SOUTHEAST LAMBERT STREET

City
PORTLAND

State
OR

Zip Code
97202-8859

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.23

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335745

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

413.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335047

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 572 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POOL, DONALD, , ,

Mailing Address 10429 SALINAS RIVER CIRCLE

City
FOUNTAIN VALLEY

State
CA

Zip Code
92708-6841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335748

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POZZI, ROBERT, , ,

Mailing Address 3733 FALSTONE ROAD

City
NORTH CHESTERFIELD

State
VA

Zip Code
23234-3769

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335389

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATER

State
FL

Zip Code
33764-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

512.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335143

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.45

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 573 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSEN, CARL, , ,

Mailing Address 2046 US HWY 441N

City
DUBLINState
GAZip Code
31021-0347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARL VINSON VAOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335691

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROTH, DEIDRE, , ,

Mailing Address 2721 WEST GULF DRIVE

City
SANIBELState
FLZip Code
33957-5914FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335724

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROTH, DEIDRE, , ,

Mailing Address 2721 WEST GULF DRIVE

City
SANIBELState
FLZip Code
33957-5914FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

371.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335726

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 574 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTONState
WAZip Code
98058-8701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335145

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTONState
WAZip Code
98058-8701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335147

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCOWDEN, TOM, , ,

Mailing Address 3934 MARIETTA WAY

City
SAINT CLOUDState
FLZip Code
34772-8712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

291.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335468

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 575 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SELLERS, KAREN, , ,

Mailing Address 16 ASPEN WAY

City
SCHWENKSVILLE

State
PA

Zip Code
19473-1788

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARLEYSVILLE INS.

Occupation (for Individual)
CUSTOMER SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.93

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335823

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SELLERS, KAREN, , ,

Mailing Address 16 ASPEN WAY

City
SCHWENKSVILLE

State
PA

Zip Code
19473-1788

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARLEYSVILLE INS.

Occupation (for Individual)
CUSTOMER SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.93

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335826

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SELLERS, KAREN, , ,

Mailing Address 16 ASPEN WAY

City
SCHWENKSVILLE

State
PA

Zip Code
19473-1788

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARLEYSVILLE INS.

Occupation (for Individual)
CUSTOMER SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

269.93

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335827

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTER

State
PA

Zip Code
17601-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335473

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHELTON, JANICE, , ,

Mailing Address 152 MASSEY RD

City
LOCUST FORK

State
AL

Zip Code
35097-5934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.70

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335855

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHELTON, JANICE, , ,

Mailing Address 152 MASSEY RD

City
LOCUST FORK

State
AL

Zip Code
35097-5934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

272.70

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335859

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 577 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHELTON, JANICE, , ,

Mailing Address 152 MASSEY RD

City

LOCUST FORK

State

AL

Zip Code

35097-5934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

272.70

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335860

Amount of Each Receipt this Period

0.10

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City

PACE

State

FL

Zip Code

32571-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

998.15

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335603

Amount of Each Receipt this Period

4.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City

PACE

State

FL

Zip Code

32571-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

998.15

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335615

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335730

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335731

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335732

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 579 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLE

State
FL

Zip Code
33772-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335667

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WESTERHOLD, STEVE, , ,

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State
NM

Zip Code
87124-7621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335739

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, OHLAND, , ,

Mailing Address 1706 E. KYLE ROAD

City

CLUTE

State
TX

Zip Code
77531-3413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

378.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335218

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.45

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 580 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZANIOS, JAMES (JIM), , ,

Mailing Address P.O. BOX 7005

City
ALBUQUERQUEState
NMZip Code
87194-7005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.35

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335396

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLEState
MIZip Code
49418-2259FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.65

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335292

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.335883

Amount of Each Receipt this Period

24872.16

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 581 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINE

State
MN

Zip Code
56535-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INC

Occupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336331

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTI

State
MI

Zip Code
48197-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336397

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLE

State
TX

Zip Code
76034-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336391

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 582 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AMSTERDAM, LAVERNE, , ,

Mailing Address 5705 PINE VALLEY DR.

City
FLOWER MOUND

State
TX

Zip Code
75022-6505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.336007

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSEN, JOHN, , ,

Mailing Address 1225 OAK MEADOW CIR

City
IDAHO FALLS

State
ID

Zip Code
83406-4693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INVENTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.336333

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARCHER, LYNNE, , ,

Mailing Address 20 SAINT PETERS WALK

City
SUGAR LAND

State
TX

Zip Code
77479-2525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARCHER AUTO GROUP

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.336300

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

420.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 583 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLEState
ILZip Code
60532-3219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336253

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCHP

City
SIERRA VISTAState
AZZip Code
85635-5065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335909

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENEDETTO, SUZANNE, , ,

Mailing Address 23 STRATTON

City
MIDDLETOWNState
NYZip Code
10940-3113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAIN STREET TITLE SETTLEMENT SVCSOccupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

527.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336220

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLYSETH, MARTIN, , ,

Mailing Address 2835 N. HWY A1A UNIT 501

City
INDIALANTIC

State
FL

Zip Code
32903-2152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336093

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOBEE, THOMAS. G, , ,

Mailing Address 8167 GARY AVE

City
WESTLAND

State
MI

Zip Code
48185-7083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.95

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336061

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336103

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 585 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOTKIN, NANCY C, , ,

Mailing Address 24790 PARK DRIVE

City
SUMMERLAND KEY

State
FL

Zip Code
33042-4407

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336193

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335930

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336062

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1020.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336406

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336271

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336273

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336274

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336275

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336276

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 588 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336277

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE; #70

City
LAS VEGAS

State
NV

Zip Code
89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336278

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRENNAN, CAROL, , ,

Mailing Address 285 ASSEMBLY STREET

City
WAYNESVILLE

State
NC

Zip Code
28786-3905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

282.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336465

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 589 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRENNAN, CAROL, , ,

Mailing Address 285 ASSEMBLY STREET

City
WAYNESVILLEState
NCZip Code
28786-3905FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336466

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRENNAN, EDWARD, , ,

Mailing Address 19669 GLEEDSVILLE ROAD

City
LEESBURGState
VAZip Code
20175-8848FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336200

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BREWER, VAN B, , ,

Mailing Address 4590 S DANYELL DR.

City
CHANDLERState
AZZip Code
85249-2630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

501.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335977

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

335.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 590 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BROWN, ELLEN, , ,

Mailing Address P.O. BOX 2156

City
SILSBEEState
TXZip Code
77656-2156FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336258

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTONState
OHZip Code
45383-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335907

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTONState
OHZip Code
45383-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336451

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

130.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 591 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRYANT, JUDITH, , ,

Mailing Address 28 WOOD AVE.

City
CONCORDState
NHZip Code
03301-2731FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336266

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTONState
TXZip Code
77079-3182FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336033

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURROUGHS, ANNE, , ,

Mailing Address 2024 ILLINOIS AVENUE

City
STEVENS POINTState
WIZip Code
54481-3949FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336039

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARMANY, RAFAEL, , ,

Mailing Address 2410 E. CARTER AVE.

City
FRESNO

State
CA

Zip Code
93730-4753

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
RECORDING ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.35

Date of Receipt

MM / DD / YYYY
09 / 02 / 2022

Transaction ID : SA17.336336

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMAN

State
SC

Zip Code
29349-5600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

MM / DD / YYYY
09 / 02 / 2022

Transaction ID : SA17.335954

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMAN

State
SC

Zip Code
29349-5600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

MM / DD / YYYY
09 / 02 / 2022

Transaction ID : SA17.335956

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 593 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMANState
SCZip Code
29349-5600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335958

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMANState
SCZip Code
29349-5600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335960

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARTER, CHRISTOPHER W, , ,

Mailing Address 103 SOUTH GALA COURT

City
BONAIREState
GAZip Code
31005-4033FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336138

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHANDLER, DAVID, , ,

Mailing Address 3779 PALM CREST DR.

City
HIGHLAND

State
CA

Zip Code
92346-1973

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLIMET INSTRUMENTS

Occupation (for Individual)
ENGINEERING MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336151

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARK, ALBERT, , ,

Mailing Address P.O.BOX 966

City
STARKVILLE

State
MS

Zip Code
39760-0966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
C. C. CLARK, INC.

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336235

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, ALBERT, , ,

Mailing Address P.O.BOX 966

City
STARKVILLE

State
MS

Zip Code
39760-0966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
C. C. CLARK, INC.

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1280.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336322

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

105.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 595 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARK, ALBERT, , ,

Mailing Address P.O.BOX 966

City
STARKVILLEState
MSZip Code
39760-0966FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
C. C. CLARK, INC.Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336323

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARK, ALBERT, , ,

Mailing Address P.O.BOX 966

City
STARKVILLEState
MSZip Code
39760-0966FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
C. C. CLARK, INC.Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336324

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, ALBERT, , ,

Mailing Address P.O.BOX 966

City
STARKVILLEState
MSZip Code
39760-0966FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
C. C. CLARK, INC.Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1280.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336327

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLE, INGRID, , ,

Mailing Address 10246 BARNES RD.

City
DURAND

State
MI

Zip Code
48429-9462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MEMORIAL HEALTH CARE

Occupation (for Individual)
PHYSICAL THERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336297

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLES, DAVE, , ,

Mailing Address 8673 WEST FAWN BROOK STREET

City
BOISE

State
ID

Zip Code
83714-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336261

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLD

State
GA

Zip Code
30736-3228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336004

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLD

State
GA

Zip Code
30736-3228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336005

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLD

State
GA

Zip Code
30736-3228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336006

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLD

State
GA

Zip Code
30736-3228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

299.70

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336009

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336012

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINGWOOD, SUMNER, , ,

Mailing Address 673 HOLCOMB RD

City
RINGGOLDState
GAZip Code
30736-3228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336013

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COOMBES, JIM, , ,

Mailing Address 7031 BEACH DR. S W

City
SEATTLEState
WAZip Code
98136-2095FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336363

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 599 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COOPRIDER, ALMA, , ,

Mailing Address 1554 HEATHER HILL DRIVE

City
LAKELAND

State
FL

Zip Code
33810-3014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336289

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COX, JOYCE S, , ,

Mailing Address 50 CONDOLEA CT

City
LAKE OSWEGO

State
OR

Zip Code
97035-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336332

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRAIG, DENISE, , ,

Mailing Address 2855 SPRING LAKE ROAD SOUTHWEST

City
PRIOR LAKE

State
MN

Zip Code
55372-2338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3650.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336380

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 600 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIDHEISER, BEVERLY, , ,

Mailing Address 1693 N SANATOGA RD

City
POTTSTOWN

State
PA

Zip Code
19464-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE REAL ESTATE PROFESSIONALS INC

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336044

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, HOWARD, , ,

Mailing Address 102703 EAST 1023 PR SOUTHEAST

City
KENNEWICK

State
WA

Zip Code
99338-1138

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336477

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTE

State
CA

Zip Code
92673-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

526.70

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335905

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUNN, ELSIE, , ,

Mailing Address 3100 DAWNS LN

City
LAMARState
COZip Code
81052-4317FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335971

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGAState
WYZip Code
82331-0399FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336318

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ECHOLS, DON, , ,

Mailing Address 3461 JERROLD BOULEVARD

City
BRUNSWICKState
OHZip Code
44212-2225FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336407

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGE

State
NJ

Zip Code
08514-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.13

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336048

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLSWORTH, CLARENCE, , ,

Mailing Address 8059 NORTH HIBISCUS LANE

City
COEUR D ALENE

State
ID

Zip Code
83815-0081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.50

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335906

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336141

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 603 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336146

Amount of Each Receipt this Period

20.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336209

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336210

Amount of Each Receipt this Period

5.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

29.72

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 604 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336214

Amount of Each Receipt this Period

22.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336410

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336411

Amount of Each Receipt this Period

22.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

49.44

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 605 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EVERETT, WILLIAM, , ,

Mailing Address 107 WOODBURN DRIVE

City
HAMPTON

State
VA

Zip Code
23664-1866

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2007.40

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335957

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FANKHANEL, PAMELA, , ,

Mailing Address 12216 IRVINE AVENUE NORTHWEST

City
BEMIDJI

State
MN

Zip Code
56601-7106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.80

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336362

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARRELL, HOLLY, , ,

Mailing Address 6329 MONTROSE DR.

City
DALLAS

State
TX

Zip Code
75209-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

432.50

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335908

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 606 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FARRELL, ROBERT, , ,

Mailing Address 651 BERING, 403

City
HOUSTONState
TXZip Code
77057-2100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
OIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336398

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOGARTY, JOY, , ,

Mailing Address 10209 EAST CALYPSO AVENUE

City
MESAState
AZZip Code
85208-7409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336017

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FORE, VICKI, , ,

Mailing Address 8 FAWNDALE LANE

City
FOUNTAIN INNState
SCZip Code
29644-8404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336288

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

105.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 607 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FOSTER, BARTON, , ,

Mailing Address 6400 HEIGHTS ROAD

City
SANTA ROSA

State
CA

Zip Code
95404-1070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
L CAPITAL LLC

Occupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336472

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOSTER, MICHAEL, , ,

Mailing Address 1573 SE GOLDEN HARVEST DRIVE

City
WAUKEE

State
IA

Zip Code
50263-8392

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336345

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRECHE, NORMA, , ,

Mailing Address 7861 LINDEN COURT

City
NAPLES

State
FL

Zip Code
34113-3201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336328

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6015.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 608 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIESS, ROLLIE, , ,

Mailing Address 2018 NORTH PURVA PLACE

City
FAYETTEVILLEState
ARZip Code
72704-6954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336303

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIESS, ROLLIE, , ,

Mailing Address 2018 NORTH PURVA PLACE

City
FAYETTEVILLEState
ARZip Code
72704-6954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.350550

Amount of Each Receipt this Period

- 500.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GATTI, PATRICIA, , ,

Mailing Address 1706 EAST 52ND STREET

City
BROOKLYNState
NYZip Code
11234-3812FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1320.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336043

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 609 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335945

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335946

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

823.84

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335947

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 610 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILILLAND, ROGER, , ,

Mailing Address 160 GOVERNORZ RD

City
PONTE VEDRA BEACHState
FLZip Code
32082-3948FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336182

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILLOCK, GAIL, , ,

Mailing Address 2518 E 66TH PL

City
TULSAState
OKZip Code
74136-1209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GAIL GILLOCKOccupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335889

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENNELAER AVE

City
STAMFORDState
CTZip Code
06902-8020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336078

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 611 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENSSELAER AVE

City
STAMFORDState
CTZip Code
06902-8020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336079

Amount of Each Receipt this Period

26.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARDT, THOMAS, , ,

Mailing Address 135 WHISTLING DUCK LANE

City
LEWISVILLEState
TXZip Code
75077-8283FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336120

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARDY, GEORGIA, , ,

Mailing Address 284 WEST 300 SOUTH

City
LA VERKINState
UTZip Code
84745-5716FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336054

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

91.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 612 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARDY, GEORGIA, , ,

Mailing Address 284 WEST 300 SOUTH

City
LA VERKIN

State
UT

Zip Code
84745-5716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336058

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONT

State
IL

Zip Code
61568-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336360

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRIS, ANITA, , ,

Mailing Address 4064 APPALACHIAN DRIVE

City
BROOKSVILLE

State
FL

Zip Code
34602-9133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336462

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, ANITA, , ,

Mailing Address 4064 APPALACHIAN DRIVE

City
BROOKSVILLE

State
FL

Zip Code
34602-9133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336463

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIS, SHIRLEY, , ,

Mailing Address 816 SOUTH RUSK STREET

City
GAINESVILLE

State
TX

Zip Code
76240-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336366

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERNANDEZPISTORINO, MARIA A, , ,

Mailing Address 6535 SW 123RD STREET

City
PINECREST

State
FL

Zip Code
33156-5554

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335939

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 614 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERNANDEZPISTORINO, MARIA A, , ,

Mailing Address 6535 SW 123RD STREET

City
PINECRESTState
FLZip Code
33156-5554FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335940

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HINKLE, MARTHA, , ,

Mailing Address 3615 , WENTWORTH DRIVE

City
ARLINGTONState
TXZip Code
76001-5255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336244

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLESState
FLZip Code
34113-7543FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPEOccupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336464

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

145.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336471

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACOBS, LES, , ,

Mailing Address 1176 WALLENS CREEK

City
LANSING

State
NC

Zip Code
28643-9070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336304

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACOBS, LES, , ,

Mailing Address 1176 WALLENS CREEK

City
LANSING

State
NC

Zip Code
28643-9070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336305

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 616 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACOBS, LES, , ,

Mailing Address 1176 WALLENS CREEK

City
LANSING

State
NC

Zip Code
28643-9070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336306

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACOBS, WARREN, , ,

Mailing Address 7684 CHANTELE LANE

City
ROSCOE

State
IL

Zip Code
61073-9768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336325

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JUNG, JAMES, , ,

Mailing Address 221 WEST BROADWAY

City
GRANVILLE

State
OH

Zip Code
43023-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336418

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

610.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 617 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KORTANEK, KENNETH, , ,

Mailing Address 405 HICKORY C R

City

PITTSBURGH

State

PA

Zip Code

15238-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336106

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KORTANEK, KENNETH, , ,

Mailing Address 405 HICKORY C R

City

PITTSBURGH

State

PA

Zip Code

15238-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336107

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KORTANEK, KENNETH, , ,

Mailing Address 405 HICKORY C R

City

PITTSBURGH

State

PA

Zip Code

15238-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336109

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KORTANEK, KENNETH, , ,

Mailing Address 405 HICKORY C R

City
PITTSBURGH

State
PA

Zip Code
15238-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2022

Transaction ID : SA17.336110

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KORTANEK, KENNETH, , ,

Mailing Address 405 HICKORY C R

City
PITTSBURGH

State
PA

Zip Code
15238-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2022

Transaction ID : SA17.336111

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRIBS, LEONARD, , ,

Mailing Address 2314 ASHLAND STREET

City
HOUSTON

State
TX

Zip Code
77008-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2022

Transaction ID : SA17.336430

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 619 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KRIEGSMANN, GEORGIANA, , ,

Mailing Address 9 COREY LANE

City
MENDHAMState
NJZip Code
07945-3308FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336085

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LACKEY, ANN, , ,

Mailing Address 1117 SPRUCE ST

City
LAKE OSWEGOState
ORZip Code
97034-6153FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336281

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAND, NANCY, , ,

Mailing Address 34 COPENHAGEN AVE

City
PUNTA GORDAState
FLZip Code
33950-7316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

277.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335968

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

80.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 620 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANG, JAMES, , ,

Mailing Address 1117 ARTISAN DR

City
MADISONState
WIZip Code
53704-6493FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USPSOccupation (for Individual)
MAILHANDLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336358

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANG, RICHARD, , ,

Mailing Address 719 15TH AVE E

City
SEATTLEState
WAZip Code
98112-4525FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336326

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANGSTON, JOANE, , ,

Mailing Address 22840 BRANCH COURT

City
TEHACHAPIState
CAZip Code
93561-8200FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335970

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

122.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 621 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LARSON, MARLENE, , ,

Mailing Address 704 RUSHVIEW DRIVE

City
JEFFERSON

State
IA

Zip Code
50129-2721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.18

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335899

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LARSON, MARLENE, , ,

Mailing Address 704 RUSHVIEW DRIVE

City
JEFFERSON

State
IA

Zip Code
50129-2721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.18

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335900

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336448

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 622 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336450

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336452

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEE, RICHARD, , ,

Mailing Address 228 SOUTH MCNAB PARKWAY

City
SAN MANUEL

State
AZ

Zip Code
85631-1149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336176

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 623 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEETUN, JEFFREY, , ,

Mailing Address 1325 GRASSLANDS BLVD, , , ,

City
LAKELANDState
FLZip Code
33803-5405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335964

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEETUN, JEFFREY, , ,

Mailing Address 1325 GRASSLANDS BLVD, , , ,

City
LAKELANDState
FLZip Code
33803-5405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335965

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEMANSKI, JEAN, , ,

Mailing Address 22237 LONG BLVD

City
DEARBORNState
MIZip Code
48124-1146FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335969

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

115.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LENGEL, MARY, , ,

Mailing Address 8092 NORTH UNION CITY ROAD

City
DENVER

State
IN

Zip Code
46926-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WALMART

Occupation (for Individual)
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336470

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEVIS, HILMA, , ,

Mailing Address 6901 AVENUE E

City
SANTA FE

State
TX

Zip Code
77510-7971

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336145

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, SUSAN, , ,

Mailing Address 13 KAITLYN LANE

City
BLOOMSBURG

State
PA

Zip Code
17815-8833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

608.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336351

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUFKIN, CHARLES, , ,

Mailing Address 3940 POMODORO CIR

City
CAPE CORAL

State
FL

Zip Code
33909-5144

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALARM CENTRAL

Occupation (for Individual)
SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336069

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUKE, MALVIN, , ,

Mailing Address 7044 NARANJA ST

City
ZEPHYRHILLS

State
FL

Zip Code
33541-1256

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336370

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAHER, PEGGY, , ,

Mailing Address 5685 SW 60TH STREET

City
OCALA

State
FL

Zip Code
34474-7671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336376

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MALMBERG, LARRY, , ,

Mailing Address 1000 SOUTH HIGHWAY 395

City
HERMISTON

State
OR

Zip Code
97838-2663

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335995

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MALUAI, MICHAEL, , ,

Mailing Address 1550 PIIHOLO TOAD

City
MAKAWAO

State
HI

Zip Code
96768-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.50

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336213

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARSHALL, AMALIA, , ,

Mailing Address 3297 COLEBROOK ROAD

City
ELIZABETHTOWN

State
PA

Zip Code
17022-9075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336042

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

380.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 627 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARTIN, TERESA, , ,

Mailing Address 23301 E STATE RT P

City
PLEASANT HILL

State
MO

Zip Code
64080-9176

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MODOT

Occupation (for Individual)
CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336474

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336481

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336482

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336483

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336484

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336485

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTIN

State
TX

Zip Code
78752-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336486

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYNARD, MARCI, , ,

Mailing Address 2708 SIERRA VISTA

City
BAKERSFIELD

State
CA

Zip Code
93306-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.50

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335980

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCBRIDE, HERMAN, , ,

Mailing Address 309 SOUTH FORK

City
JACKSON CENTER

State
OH

Zip Code
45334-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHELBY

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5261.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336113

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 630 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCBRIDE, HERMAN, , ,

Mailing Address 309 SOUTH FORK

City
JACKSON CENTER

State
OH

Zip Code
45334-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHELBY

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5261.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336114

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCBRIDE, HERMAN, , ,

Mailing Address 309 SOUTH FORK

City
JACKSON CENTER

State
OH

Zip Code
45334-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHELBY

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5261.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336115

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCBRIDE, HERMAN, , ,

Mailing Address 309 SOUTH FORK

City
JACKSON CENTER

State
OH

Zip Code
45334-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHELBY

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5261.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336119

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

575.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 631 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCOY, DANIEL, , ,

Mailing Address 7840 JOYCE DRIVE

City
CLEVELANDState
OHZip Code
44130-7149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335890

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCOY, DANIEL, , ,

Mailing Address 7840 JOYCE DRIVE

City
CLEVELANDState
OHZip Code
44130-7149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336169

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCOY, DANIEL, , ,

Mailing Address 7840 JOYCE DRIVE

City
CLEVELANDState
OHZip Code
44130-7149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336172

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

45.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 632 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCOY, DANIEL, , ,

Mailing Address 7840 JOYCE DRIVE

City
CLEVELANDState
OHZip Code
44130-7149FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336174

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MERULLO, EUGENE, , ,

Mailing Address 125 SPRING STREET

City
WATERTOWNState
MAZip Code
02472-3425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335915

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MERULLO, EUGENE, , ,

Mailing Address 125 SPRING STREET

City
WATERTOWNState
MAZip Code
02472-3425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335916

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 633 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.336150

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOK, LIMING, , ,

Mailing Address 29726 COJAK CIRCLE

City
BOERNE

State
TX

Zip Code
78015-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.336246

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOODY, CLARK, , ,

Mailing Address POB 18306

City
GOLDEN

State
CO

Zip Code
80402-6039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 02 / 2022

Transaction ID : SA17.336461

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

60.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 634 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDIN

State
FL

Zip Code
34698-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.45

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335937

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NAPIER, PATSY, , ,

Mailing Address 1353 W CABOOSE CT

City
POST FALLS

State
ID

Zip Code
83854-7462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336475

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, WAYDE, , ,

Mailing Address 1245 EMERALDPORT ST

City
CORONA

State
CA

Zip Code
92881-0967

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

540.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336181

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 635 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NEWELL, LARY, , ,

Mailing Address 13119 QUEENS FOREST

City
SAN ANTONIO

State
TX

Zip Code
78230-2005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GNB ARCHITECTS

Occupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335931

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NOLTE, JOE, , ,

Mailing Address 77 MIDDENDORF LA

City
TOWANDA

State
PA

Zip Code
18848-7896

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336057

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ODOTERLUND, JENNY, , ,

Mailing Address 704 RIVER OVERLOOK

City
FORSYTH

State
GA

Zip Code
31029-4895

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

725.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336279

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 636 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ODOTERLUND, JENNY, , ,

Mailing Address 704 RIVER OVERLOOK

City
FORSYTH

State
GA

Zip Code
31029-4895

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.15

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336439

Amount of Each Receipt this Period

505.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORR, CHUCK, , ,

Mailing Address 415 S SPAULDING AVE

City
PUEBLO

State
CO

Zip Code
81007-2899

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.75

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335959

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OTTO, RICHARD, , ,

Mailing Address 2056 LAS BRISAS COURT

City
JACKSONVILLE

State
FL

Zip Code
32224-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336183

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

555.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 637 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OTTO, RICHARD, , ,

Mailing Address 2056 LAS BRISAS COURT

City
JACKSONVILLE

State
FL

Zip Code
32224-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336186

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OTTO, RICHARD, , ,

Mailing Address 2056 LAS BRISAS COURT

City
JACKSONVILLE

State
FL

Zip Code
32224-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336233

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OTTO, RICHARD, , ,

Mailing Address 2056 LAS BRISAS COURT

City
JACKSONVILLE

State
FL

Zip Code
32224-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336236

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

40.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 638 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OTTO, RICHARD, , ,

Mailing Address 2056 LAS BRISAS COURT

City
JACKSONVILLE

State
FL

Zip Code
32224-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336241

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OTTO, RICHARD, , ,

Mailing Address 2056 LAS BRISAS COURT

City
JACKSONVILLE

State
FL

Zip Code
32224-2031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336242

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OVERBAY, TRAVIS, , ,

Mailing Address 410 EAST GUDGELL AVENUE

City
INDEPENDENCE

State
MO

Zip Code
64055-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SSC TECHNOLOGIES

Occupation (for Individual)
SOFTWARE SUPPORT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.70

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336427

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 639 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OVERBAY, TRAVIS, , ,

Mailing Address 410 EAST GUDGELL AVENUE

City
INDEPENDENCE

State
MO

Zip Code
64055-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SSC TECHNOLOGIES

Occupation (for Individual)
SOFTWARE SUPPORT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336428

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OVERBAY, TRAVIS, , ,

Mailing Address 410 EAST GUDGELL AVENUE

City
INDEPENDENCE

State
MO

Zip Code
64055-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SSC TECHNOLOGIES

Occupation (for Individual)
SOFTWARE SUPPORT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336429

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

413.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336001

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEIPPO, RAIJA, , ,

Mailing Address 3217 BELLE AVENUE

City
DENISON

State
TX

Zip Code
75020-7356

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336130

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETESCH, BRUCE, , ,

Mailing Address 2792 MOUNT VERNON HICKORY MOUNTAIN

City
SILER CITY

State
NC

Zip Code
27344-6612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336284

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHILLIPS, ROY, , ,

Mailing Address 3670 CLAIREMONT DR., STE.7

City
SAN DIEGO

State
CA

Zip Code
92117-5960

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PODIATRIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335978

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 641 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POZZI, ROBERT, , ,

Mailing Address 3733 FALSTONE ROAD

City
NORTH CHESTERFIELDState
VAZip Code
23234-3769FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335924

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRESSWOOD, KIRBY, , ,

Mailing Address 8635 W. SAHARA AVE., #435

City
LAS VEGASState
NVZip Code
89117-5858FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BERKSHIRE HATHAWAYOccupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336355

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PSALTIS, LYNN, , ,

Mailing Address 7333 N BABIGIAN AVE

City
FRESNOState
CAZip Code
93722-3497FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336076

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

230.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PURMORT, JOSEPH, , ,

Mailing Address 4547GLADE RD

City

FOREST PARK

State

GA

Zip Code

30297-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LOCKHEED MARTIN

Occupation (for Individual)

MECHANIC

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335973

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City

CLEARWATER

State

FL

Zip Code

33764-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

CARPENTER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336060

Amount of Each Receipt this Period

45.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROOM, HERBERT, , ,

Mailing Address PRO BOX 601

City

DALLESPORT

State

WA

Zip Code

98617-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336437

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SALLOT, DAVID, , ,

Mailing Address 527 STAFFORD AVE

City
ERIE

State
PA

Zip Code
16508-1726

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BROWNS TOWING AND REPAIR INC.

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336049

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SALLOT, DAVID, , ,

Mailing Address 527 STAFFORD AVE

City
ERIE

State
PA

Zip Code
16508-1726

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BROWNS TOWING AND REPAIR INC.

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336051

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANTOSUOSSO, JOSEPH, , ,

Mailing Address 13615 209TH AVE NE

City
WOODINVILLE

State
WA

Zip Code
98077-7600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CASCADE CONSOLIDATED INDUSTRIES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.40

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.335911

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 644 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKON

State
OK

Zip Code
73099-5781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.10

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336443

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEAMAN, CAROLYN, , ,

Mailing Address 10594 ALLCHIN RD

City
FENWICK

State
MI

Zip Code
48834-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336329

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIEGELSKI, EVA, , ,

Mailing Address 866 CREST PLACE

City
TOWNSHIP OF WASHIN

State
NJ

Zip Code
07676-4649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336211

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 645 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, THOMAS, , ,

Mailing Address 736 BEAVER STREET

City
SEWICKLEYState
PAZip Code
15143-1744FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336338

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335972

Amount of Each Receipt this Period

12.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336265

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

122.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336386

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.335942

Amount of Each Receipt this Period

5.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336195

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 647 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIPTON, ANCEL, , ,

Mailing Address 2040 SHEFFIELD DRIVE

City
JACKSONState
MSZip Code
39211-5848FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.05

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.336003

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TONKER, WANDA, , ,

Mailing Address 436 RIVER RUN DRIVE

City
PALMYRAState
VAZip Code
22963-4251FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.35

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.336361

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TOWNSEND, FREDERICK, , ,

Mailing Address 1907 SOUTH LE HOMME DIEU DRIVE NOR

City
ALEXANDRIAState
MNZip Code
56308-8577FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SANFORD HEALTHOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

Transaction ID : SA17.336478

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336118

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336122

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336123

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 649 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TYLER, ERNEST, , ,

Mailing Address 23432 NIGHTSKY RD

City
RAMONAState
CAZip Code
92065-5924FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336073

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TYLER, ERNEST, , ,

Mailing Address 23432 NIGHTSKY RD

City
RAMONAState
CAZip Code
92065-5924FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.336075

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VON BON, JOHN, , ,

Mailing Address W173N10234 WOODBRIDGE LANE

City
GERMANTOWNState
WIZip Code
53022-4685FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

566.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Transaction ID : SA17.335983

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

215.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 650 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIRE

State
MI

Zip Code
49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.44

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336095

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIRE

State
MI

Zip Code
49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.44

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336424

Amount of Each Receipt this Period

12.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, NORMA, , ,

Mailing Address 1914 FLORA VISTA

City
NEEDLES

State
CA

Zip Code
92363-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 02 / 2022

Transaction ID : SA17.336212

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 651 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILSON, JEAN, , ,

Mailing Address 5644 ARAL DRIVE

City
LAKELAND

State
FL

Zip Code
33805-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.71

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336185

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOOD, HYMMAN, , ,

Mailing Address 2706 WEST ASHLAN AVENUE SP201

City
FRESNO

State
CA

Zip Code
93705-1751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336356

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANEZ, OLGA, , ,

Mailing Address 9655 CAMERON ST

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

368.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336140

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

261.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 652 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZAGAR, ALICE, , ,

Mailing Address 20791 TREBEC BLVD

City
CLEVELAND

State
OH

Zip Code
44119-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336094

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZAGAR, ALICE, , ,

Mailing Address 20791 TREBEC BLVD

City
CLEVELAND

State
OH

Zip Code
44119-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336097

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLE

State
MI

Zip Code
49418-2259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

444.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2022

Transaction ID : SA17.336165

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 653 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022**Transaction ID : SA17.336487**

Amount of Each Receipt this Period

2242.94

☒ Memo Item
CONTRIBUTIONNON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAGNERIS, JULES, , ,

Mailing Address 2116 W 78TH STREET

City
LOS ANGELESState
CAZip Code
90047-2315FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
JULES BAGNERIS REALTYOccupation (for Individual)
R E BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022**Transaction ID : SA17.336590**

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BATTLE, DEBBIE, , ,

Mailing Address 2 BRENNAN COURT

City
AMARILLOState
TXZip Code
79121-1058FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2221.09

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022**Transaction ID : SA17.336936**

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.55

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 654 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BATTLE, DEBBIE, , ,

Mailing Address 2 BRENNAN COURT

City
AMARILLO

State
TX

Zip Code
79121-1058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2221.09

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336942

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336722

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336725

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.35

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 655 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLON

State
IL

Zip Code
62269-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.350263

Amount of Each Receipt this Period

- 0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEHRENS, B. ANTHONY, , ,

Mailing Address 14555 HWY 163

City
HARRISBURG

State
AR

Zip Code
72432-9026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.20

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336657

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEHRENS, B. ANTHONY, , ,

Mailing Address 14555 HWY 163

City
HARRISBURG

State
AR

Zip Code
72432-9026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

316.20

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336660

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 656 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOBEE, THOMAS. G. , ,

Mailing Address 8167 GARY AVE

City
WESTLANDState
MIZip Code
48185-7083FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337285

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336809

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337002

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 657 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337480

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOORD, JEFF, , ,

Mailing Address 225 FLORENCE AVE.

City
WILMINGTONState
DEZip Code
19803-2354FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336954

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336662

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 658 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337226

Amount of Each Receipt this Period

0.10

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337240

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEW

State
DE

Zip Code
19970-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

238.60

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336501

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 659 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEW

State
DE

Zip Code
19970-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.60

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337020

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEW

State
DE

Zip Code
19970-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.60

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337024

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, DOROTHY, , ,

Mailing Address 3610 TOWN LAKE BLVD

City
ORANGE

State
TX

Zip Code
77630-2079

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.50

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336591

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 660 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336510

Amount of Each Receipt this Period

0.11

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURGESS, BARBARA, , ,

Mailing Address 3177 CHERRY MEADOW PATH

City
LEXINGTON

State
KY

Zip Code
40509-8547

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337103

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASEMENT, SANDRA, , ,

Mailing Address 28356 ALAVA

City
MISSION VIEJO

State
CA

Zip Code
92692-1634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

248.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337388

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.51

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 661 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COLES, DAVE, , ,

Mailing Address **8673 WEST FAWN BROOK STREET**

City
BOISE

State
ID

Zip Code
83714-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6140.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336569

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COURSON, CARL, , ,

Mailing Address **900 N E 3RD STREET**

City

BELLE GLADE

State

FL

Zip Code

33430-2042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BIG LAKE SNACK SALES, INC

Occupation (for Individual)
V PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.65

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336664

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CRAIG, DENISE, , ,

Mailing Address **2855 SPRING LAKE ROAD SOUTHWEST**

City

PRIOR LAKE

State

MN

Zip Code

55372-2338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3650.40

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336946

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 662 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRAIG, DENISE, , ,

Mailing Address 2855 SPRING LAKE ROAD SOUTHWEST

City
PRIOR LAKE

State
MN

Zip Code
55372-2338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3650.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336947

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEGRAFFT, JANE E, , ,

Mailing Address 1001 MIDDLEFORD RD

City
SEAFORD

State
DE

Zip Code
19973-3638

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337026

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTE

State
CA

Zip Code
92673-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

526.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337223

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 663 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336721

Amount of Each Receipt this Period

1.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336723

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336727

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

5.75

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 664 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336728

Amount of Each Receipt this Period

10.11

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336734

Amount of Each Receipt this Period

0.19

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ESSOE, RAMONA, , ,

Mailing Address N33W29231

City
PEWAUKEE

State
WI

Zip Code
53072-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337157

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 665 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ESTHER, KENDA, , ,

Mailing Address 13251 HOLLY STREET #E

City
THORNTON

State
CO

Zip Code
80241-4310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337184

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337291

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337297

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 666 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337299

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337300

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.17

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337443

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 667 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337444

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337447

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337448

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 668 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337449

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337453

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337454

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 669 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLAS

State
TX

Zip Code
75248-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337455

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESECKE, RICHARD, , ,

Mailing Address 1807 HWY281 STE 4

City
MARBLE FALLS

State
TX

Zip Code
78654-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.45

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337108

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESECKE, RICHARD, , ,

Mailing Address 1807 HWY281 STE 4

City
MARBLE FALLS

State
TX

Zip Code
78654-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

547.45

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337109

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 670 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337284

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337327

Amount of Each Receipt this Period

7.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAYBILL, JUDY, , ,

Mailing Address 551 TANNER AVENUE

City
GREENDALE

State
IN

Zip Code
47025-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336528

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GROTE, ADRIENNE, , ,

Mailing Address 116 CENTENNIAL ST

City
SANTA CRUZ

State
CA

Zip Code
95060-6502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.10

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336593

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROTE, ADRIENNE, , ,

Mailing Address 116 CENTENNIAL ST

City
SANTA CRUZ

State
CA

Zip Code
95060-6502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.10

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336595

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GROTE, ADRIENNE, , ,

Mailing Address 116 CENTENNIAL ST

City
SANTA CRUZ

State
CA

Zip Code
95060-6502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

362.10

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336597

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 672 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336654

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336655

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

608.80

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336656

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENSSELAER AVE

City
STAMFORDState
CTZip Code
06902-8020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337349

Amount of Each Receipt this Period

0.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENSSELAER AVE

City
STAMFORDState
CTZip Code
06902-8020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337350

Amount of Each Receipt this Period

1.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENSSELAER AVE

City
STAMFORDState
CTZip Code
06902-8020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337351

Amount of Each Receipt this Period

0.05

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 674 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENSSELAER AVE

City
STAMFORDState
CTZip Code
06902-8020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337355

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENSSELAER AVE

City
STAMFORDState
CTZip Code
06902-8020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337357

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENSSELAER AVE

City
STAMFORDState
CTZip Code
06902-8020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337359

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 675 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALLENBECK, GEORGE, , ,

Mailing Address 22 VAN RENSSELAER AVE

City
STAMFORD

State
CT

Zip Code
06902-8020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337364

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMILTON, CONNIE J, , ,

Mailing Address 5923 NE MOONSTONE DR.

City
LEES SUMMIT

State
MO

Zip Code
64064-1190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336523

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMILTON, CONNIE J, , ,

Mailing Address 5923 NE MOONSTONE DR.

City
LEES SUMMIT

State
MO

Zip Code
64064-1190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

920.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336524

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIMAN, NANCY, , ,

Mailing Address P.O. BOX 549

City
WOODACRE

State
CA

Zip Code
94973-0549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.90

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336503

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIMAN, NANCY, , ,

Mailing Address P.O. BOX 549

City
WOODACRE

State
CA

Zip Code
94973-0549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.90

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336504

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOFFMAN, JEFFREY, , ,

Mailing Address 318 NOEL DRIVE

City
MONROEVILLE

State
PA

Zip Code
15146-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

465.43

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337457

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 677 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOPFENSBERGER, ANDREW, , ,

Mailing Address 4606 BOYNTON PLACE

City
MADISON

State
WI

Zip Code
53714-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.25

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336784

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOWINGTON, RICHARD, , ,

Mailing Address 3443 JAMESON LN.

City
WINSTON SALEM

State
NC

Zip Code
27106-4772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.35

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336781

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUTCHINS, JAMES, , ,

Mailing Address P.O. BOX 1844

City
BOERNE

State
TX

Zip Code
78006-6844

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

343.11

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337288

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 678 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUTCHINS, JAMES, , ,

Mailing Address P.O. BOX 1844

City
BOERNEState
TXZip Code
78006-6844FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337289

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUTCHINS, JAMES, , ,

Mailing Address P.O. BOX 1844

City
BOERNEState
TXZip Code
78006-6844FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337292

Amount of Each Receipt this Period

0.03

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUTCHINS, JAMES, , ,

Mailing Address P.O. BOX 1844

City
BOERNEState
TXZip Code
78006-6844FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

343.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337294

Amount of Each Receipt this Period

0.03

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 679 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JAMES, JERRY, , ,

Mailing Address 409-42 AVE.

City
GREELEY

State
CO

Zip Code
80634-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
O-I

Occupation (for Individual)
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337375

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336676

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336680

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 680 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337245

Amount of Each Receipt this Period

1.80

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337246

Amount of Each Receipt this Period

1.80

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337251

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7.60

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 681 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337254

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337255

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337256

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 682 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KAESGEN, DIETER, , ,

Mailing Address 19460 FRAZIER

City
ROCKY RIVERState
OHZip Code
44116-1727FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337463

Amount of Each Receipt this Period

125.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAPLOWITZ, ROBERT, , ,

Mailing Address 6670 GARDE ROAD

City
BOYNTON BEACHState
FLZip Code
33472-7310FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.75

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.336663

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANG, RICHARD, , ,

Mailing Address 719 15TH AVE E

City
SEATTLEState
WAZip Code
98112-4525FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

994.93

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.336598

Amount of Each Receipt this Period

0.12

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 683 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNA

State
MN

Zip Code
55060-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.85

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336488

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, HOGUE, , ,

Mailing Address 5931 LITTLE BRANDYWINE CRK

City
SAN ANTONIO

State
TX

Zip Code
78233-5125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.37

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336697

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, SUSAN, , ,

Mailing Address 13 KAITLYN LANE

City
BLOOMSBURG

State
PA

Zip Code
17815-8833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

608.10

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336665

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 684 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEWIS, SUSAN, , ,

Mailing Address 13 KAITLYN LANE

City
BLOOMSBURGState
PAZip Code
17815-8833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336666

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOVEJOY, BETTY, , ,

Mailing Address 5500 PINERIDGE DRIVE

City
ARLINGTONState
TXZip Code
76016-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337233

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACPHERSON, LINDA, , ,

Mailing Address 1242 25TH STREET

City
OGDENState
UTZip Code
84401-2809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337149

Amount of Each Receipt this Period

3.34

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3.79

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 685 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCKAY, CHRISTINA, , ,

Mailing Address 6114 LICKTON PIKE

City
GOODLETTSVILLE

State
TN

Zip Code
37072-9147

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336681

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKAY, CHRISTINA, , ,

Mailing Address 6114 LICKTON PIKE

City
GOODLETTSVILLE

State
TN

Zip Code
37072-9147

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336683

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336768

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 686 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336828

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337467

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337468

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

19.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 687 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337469

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337470

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337471

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 688 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337472

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORR, CHUCK, , ,

Mailing Address 415 S SPAULDING AVE

City
PUEBLO

State
CO

Zip Code
81007-2899

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.75

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336514

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ORR, CHUCK, , ,

Mailing Address 415 S SPAULDING AVE

City
PUEBLO

State
CO

Zip Code
81007-2899

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

505.75

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336515

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 689 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAHL, JUDY, , ,

Mailing Address 2909 SOUTHEAST LAMBERT STREET

City
PORTLAND

State
OR

Zip Code
97202-8859

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.23

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337483

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAHL, JUDY, , ,

Mailing Address 2909 SOUTHEAST LAMBERT STREET

City
PORTLAND

State
OR

Zip Code
97202-8859

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.23

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337484

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PAHL, JUDY, , ,

Mailing Address 2909 SOUTHEAST LAMBERT STREET

City
PORTLAND

State
OR

Zip Code
97202-8859

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

976.23

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337485

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 690 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAHL, JUDY, , ,

Mailing Address 2909 SOUTHEAST LAMBERT STREET

City
PORTLANDState
ORZip Code
97202-8859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337486

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAHL, JUDY, , ,

Mailing Address 2909 SOUTHEAST LAMBERT STREET

City
PORTLANDState
ORZip Code
97202-8859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

976.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337487

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMINGState
OHZip Code
45729-5153FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

413.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336632

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 691 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336633

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336635

Amount of Each Receipt this Period

2.50

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

413.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336637

Amount of Each Receipt this Period

0.10

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 692 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEON

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337061

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POPPE, LORI, , ,

Mailing Address P.O. BOX 1112

City
BAKER

State
MT

Zip Code
59313-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1386.70

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336553

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGAS

State
NV

Zip Code
89135-1711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.30

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337080

Amount of Each Receipt this Period

0.60

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 693 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGASState
NVZip Code
89135-1711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337083

Amount of Each Receipt this Period

0.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGASState
NVZip Code
89135-1711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337134

Amount of Each Receipt this Period

0.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGASState
NVZip Code
89135-1711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337136

Amount of Each Receipt this Period

4.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

5.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 694 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGASState
NVZip Code
89135-1711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337141

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGASState
NVZip Code
89135-1711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337328

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYNOLDS, KAREN, , ,

Mailing Address 10994 WILLOW VALLEY COURT

City
LAS VEGASState
NVZip Code
89135-1711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337332

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 695 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSS, ERROL, , ,

Mailing Address 265 CONKLIN ST

City
FARMINGDALE

State
NY

Zip Code
11735-2661

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARDSCRABBLE

Occupation (for Individual)
BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337267

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COAST

State
FL

Zip Code
32137-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336513

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SALVADORI, MARY, , ,

Mailing Address 1403 STRATFIELD CIRCLE NE

City
BROOKHAVEN

State
GA

Zip Code
30319-2522

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337014

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 696 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANTOSUOSSO, JOSEPH, , ,

Mailing Address 13615 209TH AVE NE

City
WOODINVILLE

State
WA

Zip Code
98077-7600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CASCADE CONSOLIDATED INDUSTRIES

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.40

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336500

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHERMBECK, JULIE, , ,

Mailing Address 2043 HAMILTON NEW LONDON RD

City
HAMILTON

State
OH

Zip Code
45013-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.20

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337113

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHLICHTINGER, CARL, , ,

Mailing Address 97 DURANT AVENUE

City
STATEN ISLAND

State
NY

Zip Code
10306-3853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF - PART TIME

Occupation (for Individual)

PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

432.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.336529

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCOWDEN, TOM, , ,

Mailing Address 3934 MARIETTA WAY

City
SAINT CLOUD

State
FL

Zip Code
34772-8712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336624

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIMON, PATRICIA, , ,

Mailing Address 11823 FAIRWAY DR.

City
LITTLE ROCK

State
AR

Zip Code
72212-3422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336919

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SNYDER, ROBERT A, , ,

Mailing Address P O BOX 141

City
FALLS VILLAGE

State
CT

Zip Code
06031-0141

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDWARD R HAMILTON,BOOKSELLER

Occupation (for Individual)
SHIP BOOKS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

292.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336824

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 698 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.336584

Amount of Each Receipt this Period

0.06

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STANCIL, JAMES A, , ,

Mailing Address 4423 US HWY 117 SOUTH

City
WILSONState
NCZip Code
27893-0936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.70

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.336492

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANCIL, JAMES A, , ,

Mailing Address 4423 US HWY 117 SOUTH

City
WILSONState
NCZip Code
27893-0936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

455.70

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.336493

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.06

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 699 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STANCIL, JAMES A, , ,

Mailing Address 4423 US HWY 117 SOUTH

City
WILSONState
NCZip Code
27893-0936FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336494

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEWState
CAZip Code
94043-4428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336729

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TESAR, MICHAEL, , ,

Mailing Address 10 AURORA DRIVE

City
ROLLING HILLS ESTAState
CAZip Code
90274-4202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1843.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336506

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.05

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 700 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLEState
COZip Code
81631-5853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLCOccupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.34

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.336713

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOLER, DOUGLAS, , ,

Mailing Address 3201 58TH ST S

City
GULFPORTState
FLZip Code
33707-6024FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VAOccupation (for Individual)
IT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337005

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.336765

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 701 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTIN

State
TX

Zip Code
78731-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337399

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANDER VORSTE, CRAIG, , ,

Mailing Address 12370 EAST 37TH STREET

City
YUMA

State
AZ

Zip Code
85367-5900

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336602

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VANDER VORSTE, CRAIG, , ,

Mailing Address 12370 EAST 37TH STREET

City
YUMA

State
AZ

Zip Code
85367-5900

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

673.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.336606

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 702 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VANDER VORSTE, CRAIG, , ,

Mailing Address 12370 EAST 37TH STREET

City
YUMAState
AZZip Code
85367-5900FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336608

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATSON, ERIC, , ,

Mailing Address 1000 NE 95TH ST

City
OCALAState
FLZip Code
34479-1160FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336834

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEHMAN, JOAN, , ,

Mailing Address 831 HICKORY KNOB CIRCLE

City
CEDAR HILLState
TXZip Code
75104-7803FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336628

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 703 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOOD

State
NY

Zip Code
11731-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.05

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337408

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOOD

State
NY

Zip Code
11731-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.05

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337409

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIRE

State
MI

Zip Code
49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

313.44

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337178

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 704 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITYState
FLZip Code
33868-5113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.336536

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WITKINS, NORMAN, , ,

Mailing Address 2625 IVA COURT UNIT 24

City
BELOITState
WIZip Code
53511-6614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337376

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337514

Amount of Each Receipt this Period

10448.08

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 705 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLISON, SHIRLEY, , ,

Mailing Address 2304 JUANITA AVENUE

City
SAN ANGELO

State
TX

Zip Code
76901-1414

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337529

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BALCHOWSKY, MAX, , ,

Mailing Address 1048 IRVINE AVENUE

City
NEWPORT BEACH

State
CA

Zip Code
92660-4602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOD

Occupation (for Individual)
ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337630

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARR, CARLA, , ,

Mailing Address P.O. BOX 745

City
RUNNING SPRINGS

State
CA

Zip Code
92382-0745

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337913

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 706 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARR, CARLA, , ,

Mailing Address P.O. BOX 745

City
RUNNING SPRINGSState
CAZip Code
92382-0745FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337915

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCP

City
SIERRA VISTAState
AZZip Code
85635-5065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337556

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENNETT, SONJA, , ,

Mailing Address 530 LINDA STREET

City
MACCLENLYState
FLZip Code
32063-4161FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337698

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 707 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BENNETT, SONJA, , ,

Mailing Address 530 LINDA STREET

City
MACCLENNYState
FLZip Code
32063-4161FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337699

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENNETT, SONJA, , ,

Mailing Address 530 LINDA STREET

City
MACCLENNYState
FLZip Code
32063-4161FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337703

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLANKENSHIP, KATHY, , ,

Mailing Address 125 ORCHARD DR.

City
ELIDAState
OHZip Code
45807-1084FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337861

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 708 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOBEE, THOMAS. G. , ,

Mailing Address 8167 GARY AVE

City
WESTLAND

State
MI

Zip Code
48185-7083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.95

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337730

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOBEE, THOMAS. G. , ,

Mailing Address 8167 GARY AVE

City
WESTLAND

State
MI

Zip Code
48185-7083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.95

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337749

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOOTHE, PATTI, , ,

Mailing Address 205 E HOUSTON

City
LEONARD

State
TX

Zip Code
75452-2501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

817.90

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337708

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 709 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337826

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRACHFELD, DONALD, , ,

Mailing Address 25 FOUR SEASONS DRIVE

City
NORTH CALDWELL

State
NJ

Zip Code
07006-6134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.35

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337865

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRENNAN, CAROL, , ,

Mailing Address 285 ASSEMBLY STREET

City
WAYNESVILLE

State
NC

Zip Code
28786-3905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

282.65

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337572

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 710 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BYRD, FAREL, , ,

Mailing Address 986 SUGAR LANE

City
COLLIERVILLE

State
TN

Zip Code
38017-8645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337551

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAREY, ILDIKO, , ,

Mailing Address 135 JAMES DRIVE

City
SAYLORSBURG

State
PA

Zip Code
18353-7773

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

679.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337866

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARY, KATHARINE, , ,

Mailing Address 276 NORTHLAKE DRIVE

City
COLDWATER

State
MI

Zip Code
49036-8661

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337787

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 711 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337709

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHANDLER, DAVID, , ,

Mailing Address 3779 PALM CREST DR.

City
HIGHLAND

State
CA

Zip Code
92346-1973

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLIMET INSTRUMENTS

Occupation (for Individual)
ENGINEERING MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337679

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CIULLA, BOB, , ,

Mailing Address 3778 TIMBERLAKE DRIVE

City
RICHFIELD

State
OH

Zip Code
44286-9187

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HERSCHAL PRODUCTS

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337696

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

445.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 712 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CODY, BARBARA, , ,

Mailing Address 24034 EAGLE MOUNTAIN STREET

City
WEST HILLSState
CAZip Code
91304-2109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337562

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CODY, BARBARA, , ,

Mailing Address 24034 EAGLE MOUNTAIN STREET

City
WEST HILLSState
CAZip Code
91304-2109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

Transaction ID : SA17.350562

Amount of Each Receipt this Period

- 35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CUSICK, ROBERT, , ,

Mailing Address 4722 SOUTHWEST DOSCH PARK LANE

City
PORTLANDState
ORZip Code
97239-1284FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.45

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337889

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 713 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAHLKE, GARY, , ,

Mailing Address 10115 107TH PLACE NORTH

City
MAPLE GROVE

State
MN

Zip Code
55369-2729

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1496.85

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337710

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EARP, BONNIE, , ,

Mailing Address 625 OLAND STREET

City
RUCKERSVILLE

State
VA

Zip Code
22968-3713

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337716

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EARP, BONNIE, , ,

Mailing Address 625 OLAND STREET

City
RUCKERSVILLE

State
VA

Zip Code
22968-3713

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337717

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 714 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ECCLESTON, DUANE, , ,

Mailing Address 1207 SPRING BROOK RD

City
MYRTLE CREEK

State
OR

Zip Code
97457-9693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROSEBURG MATTRESS

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337519

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGE

State
NJ

Zip Code
08514-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.13

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337775

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLENDER, SANDRA, , ,

Mailing Address 1231 BAYOU BLACK DRIVE

City
HOUMA

State
LA

Zip Code
70360-7510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
S.ERNEST ELLENDER, SR.,INC.

Occupation (for Individual)
FINANCE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337636

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 715 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLENDER, SANDRA, , ,

Mailing Address 1231 BAYOU BLACK DRIVE

City
HOUMAState
LAZip Code
70360-7510FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
S.ERNEST ELLENDER, SR.,INC.Occupation (for Individual)
FINANCE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337637

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLENDER, SANDRA, , ,

Mailing Address 1231 BAYOU BLACK DRIVE

City
HOUMAState
LAZip Code
70360-7510FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
S.ERNEST ELLENDER, SR.,INC.Occupation (for Individual)
FINANCE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337639

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLENDER, SANDRA, , ,

Mailing Address 1231 BAYOU BLACK DRIVE

City
HOUMAState
LAZip Code
70360-7510FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
S.ERNEST ELLENDER, SR.,INC.Occupation (for Individual)
FINANCE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337814

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLENDER, SANDRA, , ,

Mailing Address 1231 BAYOU BLACK DRIVE

City
HOUMA

State
LA

Zip Code
70360-7510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
S.ERNEST ELLENDER, SR.,INC.

Occupation (for Individual)
FINANCE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337817

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL. G, , ,

Mailing Address 435 SE KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.85

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337614

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FABRETTI, RONALD, , ,

Mailing Address 1205 HONEOYE FALLS FIVE PT RD

City
HONEOYE FALLS

State
NY

Zip Code
14472-9046

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GETINGE AB

Occupation (for Individual)
SERVICE TECH II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.50

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337622

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 717 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FARQUHAR, MARK, , ,

Mailing Address 52234 Highbury Court

City
UTICAState
MIZip Code
48315-2866FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LEAR CORPORTIONOccupation (for Individual)
ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.35

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2022

Transaction ID : SA17.337732

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOLIN, NILE, , ,

Mailing Address 171 ANTELOPE AVENUE

City

PAGOSA SPRINGS

State

CO

Zip Code

81147-0556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2022

Transaction ID : SA17.337663

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City

RANCHO CUCAMONGA

State

CA

Zip Code

91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2022

Transaction ID : SA17.337781

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 718 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGAState
CAZip Code
91730-1916FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337782

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337735

Amount of Each Receipt this Period

12.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337736

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

47.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 719 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337737

Amount of Each Receipt this Period

12.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GINA, ALEXANDRA, , ,

Mailing Address 865 MIDLAND BLVD

City
UNIONState
NJZip Code
07083-7427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337738

Amount of Each Receipt this Period

24.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORDON, RON, , ,

Mailing Address 913 ANTLER MEADOW WAY

City
FUQUAY VARINAState
NCZip Code
27526-4849FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337625

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 720 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GREVENGOED, GORDON, , ,

Mailing Address 15 PRINCETON COURT

City
ZEELANDState
MIZip Code
49464-2082FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337621

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, GLENDA, , ,

Mailing Address 3215 W JOHN SEVIER HWY

City
KNOXVILLEState
TNZip Code
37920-5540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ATWORK, INC.Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337860

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City
LAKE PANASOFFKEEState
FLZip Code
33538-6044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

373.71

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337887

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1052.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARMS, BARB, , ,

Mailing Address 27638 EAST 2450 NORTH ROAD

City
LEXINGTON

State
IL

Zip Code
61753-9406

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337552

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIMAN, NANCY, , ,

Mailing Address P.O. BOX 549

City
WOODACRE

State
CA

Zip Code
94973-0549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337604

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERNDON, TIM, , ,

Mailing Address 413 GARTH CT.

City
APOPKA

State
FL

Zip Code
32712-4051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TIM HERNDON INS AGENCY INC.

Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337691

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 722 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERNDON, TONIA, , ,

Mailing Address 3623 HAWK ISLAND DR.

City
BRADENTON

State
FL

Zip Code
34208-9411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337862

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERNDON, TONIA, , ,

Mailing Address 3623 HAWK ISLAND DR.

City
BRADENTON

State
FL

Zip Code
34208-9411

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337863

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HITCHCOCK, ELIZABETH, , ,

Mailing Address 4160 LOCUST AVENUE

City
LONG BEACH

State
CA

Zip Code
90807-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COASTLINE INFUSION

Occupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

545.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337879

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 723 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUBBART, NANCY, , ,

Mailing Address 3095 KEY HARBOUR DRIVE

City
LAKE SAINT LOUIS

State
MO

Zip Code
63367-2097

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337653

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337758

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337890

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 724 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. IVES, HOWARD, , ,

Mailing Address 4601 E DESERT COVE AVE

City
PHOENIX

State
AZ

Zip Code
85028-3028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337541

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KLEIN, MICHAEL, , ,

Mailing Address 5220 KLEE MILL ROAD SOUTH

City
OWINGS MILLS

State
MD

Zip Code
21784-9257

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHARLES A KLEIN

Occupation (for Individual)
MECHANICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337666

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANIUS, BARBARA, , ,

Mailing Address 12662 HARRIET CIRCLE

City
DALLAS

State
TX

Zip Code
75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337677

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 725 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LARSON, MARLENE, , ,

Mailing Address 704 RUSHVIEW DRIVE

City
JEFFERSON

State
IA

Zip Code
50129-2721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.18

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337800

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEMANSKI, JEAN, , ,

Mailing Address 22237 LONG BLVD

City
DEARBORN

State
MI

Zip Code
48124-1146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.35

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337588

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LIKES, ROBERT, , ,

Mailing Address 3184 RESERVOIR DRIVE

City
SIMI VALLEY

State
CA

Zip Code
93065-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337607

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 726 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337839

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337840

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAXWELL, JOAN, , ,

Mailing Address 317 COOPER AVENUE

City
GRAFTON

State
ND

Zip Code
58237-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3275.95

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337852

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 727 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGREGOR, EARL, , ,

Mailing Address 2818 REGATTA CIR

City
FAIRFIELDState
CAZip Code
94533-7042FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337725

Amount of Each Receipt this Period

45.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337753

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337754

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 728 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337755

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337756

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337757

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

45.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 729 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337759

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337534

Amount of Each Receipt this Period

20.20

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337535

Amount of Each Receipt this Period

20.20

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

70.40

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 730 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337557

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOSER, MARLIN, , ,

Mailing Address 1742 EMERALD LAKE COURT

City
ED HOUSTON

State
TX

Zip Code
77062-8007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337533

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOWER, LESLIE, , ,

Mailing Address 3189 CANYON ROAD

City
SPRINGVILLE

State
UT

Zip Code
84663-9538

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337567

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NOWAK, DANNY, , ,

Mailing Address 715 GLENWOOD AVENUE

City
JACKSONState
MIZip Code
49203-2938FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337682

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337895

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337896

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 732 OF 1424

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337897

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337898

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PALERMO, MARK, , ,

Mailing Address 246 GARFIELD PLACD

City
BROOKLYNState
NYZip Code
11215-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

877.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337649

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 733 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PALERMO, MARK, , ,

Mailing Address 246 GARFIELD PLACD

City
BROOKLYN

State
NY

Zip Code
11215-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

877.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337650

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PENDRI, KIRAN, , ,

Mailing Address 303 THIRD STREET, UNIT 603

City
CAMBRIDGE

State
MA

Zip Code
02142-1167

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ESCIENTIA LIFE SCIENCES, LLC

Occupation (for Individual)
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337711

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETESCH, BRUCE, , ,

Mailing Address 2792 MOUNT VERNON HICKORY MOUNTAIN

City
SILER CITY

State
NC

Zip Code
27344-6612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

531.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337720

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 734 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PETESCH, BRUCE, , ,

Mailing Address 2792 MOUNT VERNON HICKORY MOUNTAIN

City
SILER CITY

State
NC

Zip Code
27344-6612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337722

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POOL, DONALD, , ,

Mailing Address 10429 SALINAS RIVER CIRCLE

City
FOUNTAIN VALLEY

State
CA

Zip Code
92708-6841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337778

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAY III, STARLING S, , ,

Mailing Address 22 HICKORY RD.

City
BEAUFORT

State
SC

Zip Code
29907-2204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337791

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 735 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RICHEY, JOE, , ,

Mailing Address 4500 16ST

City
RACINEState
WIZip Code
53405-3110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337921

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SABADIE, CARLOS, , ,

Mailing Address 1641 VELA COVE

City
SLIDELLState
LAZip Code
70458-6219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.85

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337794

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAVAGEAU, CONSTANCE, , ,

Mailing Address 6187 SE GEORGETOWN PLACE

City
HOBE SOUNDState
FLZip Code
33455-7345FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.85

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	2		

Transaction ID : SA17.337585

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 736 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAVAGEAU, CONSTANCE, , ,

Mailing Address 6187 SE GEORGETOWN PLACE

City
HOBE SOUND

State
FL

Zip Code
33455-7345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.85

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337586

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCARPONE, FRANK, , ,

Mailing Address 1217 SUNRISE AVENUE

City

POINT PLEASANT BOR

State

NJ

Zip Code

08742-3720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

865.35

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337734

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHILLING, DIANA, , ,

Mailing Address 19 AZALEA DR.

City

KEY WEST

State

FL

Zip Code

33040-6206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

243.10

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337564

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 737 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHLICHTINGER, CARL, , ,

Mailing Address 97 DURANT AVENUE

City
STATEN ISLANDState
NYZip Code
10306-3853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF - PART TIMEOccupation (for Individual)
PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337838

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337901

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337902

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 738 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPAETH PHD, EDMUND, , ,

Mailing Address 26536 LOVE LANE

City
RAMONAState
CAZip Code
92065-4822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337911

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRANDBERG, ERIC, , ,

Mailing Address 231 COLUMBIA STREET

City
OMAKState
WAZip Code
98841-9625FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
MANUFACTURING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337559

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMMES, LISA, , ,

Mailing Address 34120 118TH STREET

City
TWIN LAKESState
WIZip Code
53181-9108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RENAISSANCE ASSISTED LIVINGOccupation (for Individual)
RENAISSANCE ASSISTED LIVING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2022

Transaction ID : SA17.337665

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

105.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 739 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTIN

State
TX

Zip Code
78731-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337707

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLE

State
FL

Zip Code
33772-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337644

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAN LEEUWEN, NICOLE, , ,

Mailing Address 3985 E. MINE SHAFT RD

City
SAN TAN VALLEY

State
AZ

Zip Code
85143-6042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.47

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2022

Transaction ID : SA17.337881

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 740 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VILLANOVA, JOHN, , ,

Mailing Address 9360 COVE POINT CIR

City
BOYNTON BEACH

State
FL

Zip Code
33472-2768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIMOUSINESWORLDWIDE.COM

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.50

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337834

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE JR, JOHN M, , ,

Mailing Address P.O. BOX 630

City
CHUGIAK

State
AK

Zip Code
99567-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337883

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILHITE, DIANNA, , ,

Mailing Address 3425 COMSTOCK AVE

City
OMAHA

State
NE

Zip Code
68123-1394

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337518

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 741 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILKEN, VIRGINIA, , ,

Mailing Address 1034 ORPHEUS AVE

City
ENCINITAS

State
CA

Zip Code
92024-1755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CONTRACT LIGHTING

Occupation (for Individual)
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337596

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOJCIECHOWSKI, PASQUALE, , ,

Mailing Address 2432 BONNIE LAKES DR.

City
GREEN COVE SPRINGS

State
FL

Zip Code
32043-9268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337548

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZAREMBO, CATHERINE, , ,

Mailing Address 49 WHITMAN ROAD

City
MADISON

State
CT

Zip Code
06443-1885

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337837

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 742 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLE

State
MI

Zip Code
49418-2259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.65

Date of Receipt

09 / 03 / 2022

Transaction ID : SA17.337610

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.337925

Amount of Each Receipt this Period

823.81

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTA

State
FL

Zip Code
34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338158

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 743 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338159

Amount of Each Receipt this Period

2.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338160

Amount of Each Receipt this Period

3.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338163

Amount of Each Receipt this Period

0.22

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

6.22

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 744 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BACZYNSKI, JOHN, , ,

Mailing Address 16316 W. INDIANOLA AVE.

City
GOODYEAR

State
AZ

Zip Code
85395-7657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.15

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.337978

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.337948

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARTON, BONITA, , ,

Mailing Address 2209 NORTH OWENS ROAD

City
PLEASANT HILL

State
OH

Zip Code
45359-8738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

238.50

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338146

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 745 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BATTLE, DEBBIE, , ,

Mailing Address 2 BRENNAN COURT

City
AMARILLO

State
TX

Zip Code
79121-1058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2221.09

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338272

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338178

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BYRNES, ROBERT, , ,

Mailing Address 4555 E MAYO BLVD UNIT 34101

City
PHOENIX

State
AZ

Zip Code
85050-3788

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338282

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 746 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BYRNES, ROBERT, , ,

Mailing Address 4555 E MAYO BLVD UNIT 34101

City
PHOENIXState
AZZip Code
85050-3788FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338285

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338057

Amount of Each Receipt this Period

2.25

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338058

Amount of Each Receipt this Period

1.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

4.10

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 747 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338059

Amount of Each Receipt this Period

10.11

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338060

Amount of Each Receipt this Period

0.13

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338249

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 748 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESLER, JOAN, , ,

Mailing Address 34 TWIN COURT

City
MANAHAWKIN

State
NJ

Zip Code
08050-3184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338088

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESLER, JOAN, , ,

Mailing Address 34 TWIN COURT

City
MANAHAWKIN

State
NJ

Zip Code
08050-3184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338089

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESLER, JOAN, , ,

Mailing Address 34 TWIN COURT

City
MANAHAWKIN

State
NJ

Zip Code
08050-3184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

347.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338090

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 749 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESLER, JOAN, , ,

Mailing Address 34 TWIN COURT

City
MANAHAWKIN

State
NJ

Zip Code
08050-3184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338091

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESLER, JOAN, , ,

Mailing Address 34 TWIN COURT

City
MANAHAWKIN

State
NJ

Zip Code
08050-3184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338092

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.337930

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HINKLE, MARTHA, , ,

Mailing Address 3615 , WENTWORTH DRIVE

City
ARLINGTON

State
TX

Zip Code
76001-5255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.337965

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KITCHELL, GLENN, , ,

Mailing Address 6301 JACK RABBIT JCT

City
FARMINGTON

State
NM

Zip Code
87402-8797

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
(MTC) MED TRANS

Occupation (for Individual)
HELICOPTER AIR AMBULANCE PILO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338114

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUHN, DANIEL, , ,

Mailing Address 185 NORTH FOURTH STREET 2

City
PORTOLA

State
CA

Zip Code
96122-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.337998

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 751 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUHN, DANIEL, , ,

Mailing Address 185 NORTH FOURTH STREET 2

City
PORTOLA

State
CA

Zip Code
96122-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY
09 / 04 / 2022

Transaction ID : SA17.337999

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUHN, DANIEL, , ,

Mailing Address 185 NORTH FOURTH STREET 2

City
PORTOLA

State
CA

Zip Code
96122-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY
09 / 04 / 2022

Transaction ID : SA17.338000

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUHN, DANIEL, , ,

Mailing Address 185 NORTH FOURTH STREET 2

City
PORTOLA

State
CA

Zip Code
96122-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY
09 / 04 / 2022

Transaction ID : SA17.338001

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 752 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUHN, DANIEL, , ,

Mailing Address 185 NORTH FOURTH STREET 2

City
PORTOLA

State
CA

Zip Code
96122-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY
09 / 04 / 2022

Transaction ID : SA17.338003

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUHN, DANIEL, , ,

Mailing Address 185 NORTH FOURTH STREET 2

City
PORTOLA

State
CA

Zip Code
96122-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY
09 / 04 / 2022

Transaction ID : SA17.338004

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUHN, DANIEL, , ,

Mailing Address 185 NORTH FOURTH STREET 2

City
PORTOLA

State
CA

Zip Code
96122-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

MM / DD / YYYY
09 / 04 / 2022

Transaction ID : SA17.338005

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 753 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEE, STUART, , ,

Mailing Address 1575 ROBSHEAL DRIVE

City
SAN JOSE

State
CA

Zip Code
95125-4669

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HI DEF AUDIO VIDEO

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338190

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNA

State
MN

Zip Code
55060-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338281

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNA

State
MN

Zip Code
55060-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338283

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 754 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNAState
MNZip Code
55060-3105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338286

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNAState
MNZip Code
55060-3105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338287

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVENE, JEANNE, , ,

Mailing Address 734 EAST ACADEMY STREET

City
OWATONNAState
MNZip Code
55060-3105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338288

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

24.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LITTLEJOHN, JOHN, , ,

Mailing Address P.O. BOX 276

City
MOORESVILLE

State
IN

Zip Code
46158-0276

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.85

Date of Receipt

09 / **04** / **2022**

Transaction ID : SA17.338054

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARROCCOLI, ANGELA, , ,

Mailing Address 3801N.E.207ST. 2902

City
AVENTURA

State
FL

Zip Code
33180-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1424.00

Date of Receipt

09 / **04** / **2022**

Transaction ID : SA17.337957

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARROCCOLI, ANGELA, , ,

Mailing Address 3801N.E.207ST. 2902

City
AVENTURA

State
FL

Zip Code
33180-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1424.00

Date of Receipt

09 / **04** / **2022**

Transaction ID : SA17.337958

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARROCCOLI, ANGELA, , ,

Mailing Address 3801N.E.207ST. 2902

City
AVENTURA

State
FL

Zip Code
33180-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1424.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.337959

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARROCCOLI, ANGELA, , ,

Mailing Address 3801N.E.207ST. 2902

City
AVENTURA

State
FL

Zip Code
33180-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1424.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.337960

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARROCCOLI, ANGELA, , ,

Mailing Address 3801N.E.207ST. 2902

City
AVENTURA

State
FL

Zip Code
33180-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1424.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.337962

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.50

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARROCCOLI, ANGELA, , ,

Mailing Address 3801N.E.207ST. 2902

City
AVENTURA

State
FL

Zip Code
33180-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1424.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.337963

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPIEGL, PETER, , ,

Mailing Address W7106 PULS FARM PLACE

City
GREENVILLE

State
WI

Zip Code
54942-9501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.30

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338243

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEIDEL, CLAIRE, , ,

Mailing Address 10040 E HAPPY VALLEY RD

City
SCOTTSDALE

State
AZ

Zip Code
85255-2395

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
DOG JUDGE/WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

465.60

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338030

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 758 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEIDEL, CLAIRE, , ,

Mailing Address 10040 E HAPPY VALLEY RD

City
SCOTTSDALE

State
AZ

Zip Code
85255-2395

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
DOG JUDGE/WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.60

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338041

Amount of Each Receipt this Period

17.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338191

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338198

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 759 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338199

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338200

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338203

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 760 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLE

State
FL

Zip Code
33772-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.337983

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLE

State
FL

Zip Code
33772-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338053

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VASALE, GREGORY, , ,

Mailing Address 16 BRANDES ST

City
WEBSTER

State
MA

Zip Code
01570-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COUNTY HEAT TREAT

Occupation (for Individual)
LABORER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338221

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATSON, CLIFFORD, , ,

Mailing Address 600 WEST DRIVE

City
GLEN BURNIE

State
MD

Zip Code
21061-2035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338078

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338103

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338104

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.50

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 762 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.**C**

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338290

Amount of Each Receipt this Period

7119.97

☒ Memo Item
 CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ABBE, ROSS, , ,

Mailing Address 2721 VICTOR ST

City
BELLINGHAMState
WAZip Code
98225-2247FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

927.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338322

Amount of Each Receipt this Period

110.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTIState
MIZip Code
48197-1738FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338338

Amount of Each Receipt this Period

2.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

112.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 763 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTI

State
MI

Zip Code
48197-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338396

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BACZYNSKI, JOHN, , ,

Mailing Address 16316 W. INDIANOLA AVE.

City
GOODYEAR

State
AZ

Zip Code
85395-7657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338475

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARUN, KEN, , ,

Mailing Address 7940 PARK ROAD

City
CHARLOTTE

State
NC

Zip Code
28210-6728

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BGEA

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338489

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 764 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERRY, WILLIAM, , ,

Mailing Address 416 OAK HOLLOW LANE

City
FORT WORTHState
TXZip Code
76112-1022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338369

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338477

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWKER, MICHAEL, , ,

Mailing Address 406 RED HAWK COURT

City
BLACK EARTHState
WIZip Code
53515-9474FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VANNGUARD UTILITY PARTNERSOccupation (for Individual)
UTILITIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338498

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 765 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRENNAN, EDWARD, , ,

Mailing Address 19669 GLEEDSVILLE ROAD

City
LEESBURGState
VAZip Code
20175-8848FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338433

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BYRNES, ROBERT, , ,

Mailing Address 4555 E MAYO BLVD UNIT 34101

City
PHOENIXState
AZZip Code
85050-3788FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338508

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAREY, ILDIKO, , ,

Mailing Address 135 JAMES DRIVE

City
SAYLORSBURGState
PAZip Code
18353-7773FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

679.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338356

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

351.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 766 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARLTON, RACHAEL, , ,

Mailing Address 8761 STATE RD 78W LOT 50

City
OKEECHOBEEState
FLZip Code
34974-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1146.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2022

Transaction ID : SA17.338501

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMANState
SCZip Code
29349-5600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2022

Transaction ID : SA17.338358

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARY, KATHARINE, , ,

Mailing Address 276 NORTHLAKE DRIVE

City
COLDWATERState
MIZip Code
49036-8661FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2022

Transaction ID : SA17.338460

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 767 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COSSETT, SUSAN, , ,

Mailing Address 5421AHOSKIE DRIVE

City
HOPE MILLS

State
NC

Zip Code
28348-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2022

Transaction ID : SA17.338353

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CRAIG, DENISE, , ,

Mailing Address 2855 SPRING LAKE ROAD SOUTHWEST

City
PRIOR LAKE

State
MN

Zip Code
55372-2338

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3650.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2022

Transaction ID : SA17.338416

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CUNNINGHAM, RONALD, , ,

Mailing Address 4358 E 58TH ST

City
TULSA

State
OK

Zip Code
74135-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN ELECTRIC POWER

Occupation (for Individual)
IT ENTERPRISE ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2022

Transaction ID : SA17.338379

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 768 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUERST, JOHN, , ,

Mailing Address 13512 DOERFLER ROAD SOUTHEAST

City
SILVERTONState
ORZip Code
97381-9212FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2022

Transaction ID : SA17.338365

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DUNCKLEY JR, RL, , ,

Mailing Address 1239UBR LANE

City
CRAIGState
COZip Code
81625-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
FARMER AND RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2022

Transaction ID : SA17.338363

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EARP, BONNIE, , ,

Mailing Address 625 OLAND STREET

City
RUCKERSVILLEState
VAZip Code
22968-3713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2022

Transaction ID : SA17.338457

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

120.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 769 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FENDER, ROBBY, , ,

Mailing Address P.O. BOX 8542

City
RED BLUFFState
CAZip Code
96080-8542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338372

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FITZGERALD, TERRELL A, , ,

Mailing Address 3933 E. AZ. HIGHWAY 260

City
STAR VALLEYState
AZZip Code
85541-2495FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338312

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEST, ALBERT, , ,

Mailing Address 357 SANTA MONICA PLACE

City
CORPUS CHRISTIState
TXZip Code
78411-1611FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EMCARE/CHRISTUS HEALTHOccupation (for Individual)
EM PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338306

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

560.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 770 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOLD, WILLIAM, , ,

Mailing Address 15008 FLAT TOP RANCH ROAD

City
AUSTIN

State
TX

Zip Code
78732-2566

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338385

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City

LAKE PANASOFFKEE

State

FL

Zip Code

33538-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.71

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338303

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City

LAKE PANASOFFKEE

State

FL

Zip Code

33538-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

373.71

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338472

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 771 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HANSON, PATRICIA, , ,

Mailing Address 1515 HARD ROCK ROAD APT 136

City
IRVING

State
TX

Zip Code
75061-3951

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338429

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONT

State
IL

Zip Code
61568-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338448

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERNANDEZPISTORINO, MARIA A, , ,

Mailing Address 6535 SW 123RD STREET

City
PINECREST

State
FL

Zip Code
33156-5554

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338406

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 772 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERNANDEZ, SHARON, , ,

Mailing Address 2415 CREEK MEADOW DR.

City
HOUSTONState
TXZip Code
77084-5201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATY ISDOccupation (for Individual)
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338505

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HINDERMAN, GERALD, , ,

Mailing Address 1009 FOREST HILL DRIVE

City
WEATHERFORDState
TXZip Code
76087-1106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338410

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWELLS, SALLY, , ,

Mailing Address 7311 ROUNDROCK ROAD

City
DALLASState
TXZip Code
75248-5215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

342.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338474

Amount of Each Receipt this Period

13.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

58.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 773 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338442

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. INGALSBE, NOALEEN, , ,

Mailing Address 4 BEAVER RUN SW, ROME, GA

City
ROME

State
GA

Zip Code
30165-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

933.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338393

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACOBS, LES, , ,

Mailing Address 1176 WALLENS CREEK

City
LANSING

State
NC

Zip Code
28643-9070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338445

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 774 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KORTANEK, KENNETH, , ,

Mailing Address 405 HICKORY C R

City
PITTSBURGH

State
PA

Zip Code
15238-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338384

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRISKO, LINDA, , ,

Mailing Address 1422 HAMILTON ST

City
ALLENTOWN

State
PA

Zip Code
18102-4233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENESIS 50:20

Occupation (for Individual)
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338326

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANGSTON, JOANE, , ,

Mailing Address 22840 BRANCH COURT

City
TEHACHAPI

State
CA

Zip Code
93561-8200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.50

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338343

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 775 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338314

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.350523

Amount of Each Receipt this Period

- 50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338315

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 776 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEETUN, JEFFREY, , ,

Mailing Address 1325 GRASSLANDS BLVD, , , ,

City
LAKELAND

State
FL

Zip Code
33803-5405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338434

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUFKIN, CHARLES, , ,

Mailing Address 3940 POMODORO CIR

City
CAPE CORAL

State
FL

Zip Code
33909-5144

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALARM CENTRAL

Occupation (for Individual)
SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338443

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAKHANIAN, ANNA LEE, , ,

Mailing Address 840 MISTY ISLE DRIVE

City
GLENDALE

State
CA

Zip Code
91207-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338305

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 777 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTINState
TXZip Code
78752-4123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338340

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCBRIDE, HERMAN, , ,

Mailing Address 309 SOUTH FORK

City

JACKSON CENTER

State

OH

Zip Code

45334-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHELBYOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5261.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338405

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCINERNEY, REGINA, , ,

Mailing Address POBOX 1128

City

INDIAN SPRINGS

State

NV

Zip Code

89018-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338398

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

535.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 778 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCKAY, ROSE, , ,

Mailing Address 911 BUNTING LN

City
LIBERTYState
MOZip Code
64068-7428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338464

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKAY, ROSE, , ,

Mailing Address 911 BUNTING LN

City
LIBERTYState
MOZip Code
64068-7428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338465

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCLAUGHLIN, LINDA, , ,

Mailing Address 701 COUNTY ROAD 307

City
DURANGOState
COZip Code
81303-8113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338397

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

110.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 779 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338444

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MERULLO, EUGENE, , ,

Mailing Address 125 SPRING STREET

City
WATERTOWNState
MAZip Code
02472-3425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338440

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MERULLO, EUGENE, , ,

Mailing Address 125 SPRING STREET

City
WATERTOWNState
MAZip Code
02472-3425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338441

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 780 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022**Transaction ID : SA17.338459**

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORIARTY, JAMES, , ,

Mailing Address 9056 SYLVANIA METAMORA RD

City
SYLVANIAState
OHZip Code
43560-9427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022**Transaction ID : SA17.338293**

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURPHY, PATRICK, , ,

Mailing Address 118 WEST VIRGINIA ST APT7

City
ELMHURSTState
ILZip Code
60126-3345FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABLE ENGINEERING SERVICESOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

834.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2022**Transaction ID : SA17.338366**

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 781 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDINState
FLZip Code
34698-2115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338383

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NICKLESS, SHARON, , ,

Mailing Address 2589 SPENCER CREEK RD

City
CAMDENTONState
MOZip Code
65020-8314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338296

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OVERBAY, TRAVIS, , ,

Mailing Address 410 EAST GUDGELL AVENUE

City
INDEPENDENCEState
MOZip Code
64055-1704FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SSC TECHNOLOGIESOccupation (for Individual)
SOFTWARE SUPPORT ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338332

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 782 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PALERMO, MARK, , ,

Mailing Address 246 GARFIELD PLACD

City
BROOKLYN

State
NY

Zip Code
11215-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

877.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338439

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERDUE, BLAIR, , ,

Mailing Address 4523 WALKER AVE

City
TOLEDO

State
OH

Zip Code
43612-2313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENERAL MOTORS

Occupation (for Individual)
INDUSTRIAL ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338330

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERREAULT, LAWRENCE, , ,

Mailing Address 1017 TASCOSA DRIVE

City
HUNTSVILLE

State
AL

Zip Code
35802-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338504

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 783 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PHILLIPS, ROY, , ,

Mailing Address 3670 CLAIREMONT DR., STE.7

City

SAN DIEGO

State

CA

Zip Code

92117-5960

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

PODIATRIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338321

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRESSWOOD, KIRBY, , ,

Mailing Address 8635 W. SAHARA AVE., #435

City

LAS VEGAS

State

NV

Zip Code

89117-5858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BERKSHIRE HATHAWAY

Occupation (for Individual)

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338463

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RESTREPO, SOCORRO, , ,

Mailing Address 16263 SOUTHWEST 102ND TERRACE

City

MIAMI

State

FL

Zip Code

33196-5882

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

358.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2022

Transaction ID : SA17.338333

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 784 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSEN, CARL, , ,

Mailing Address 2046 US HWY 441N

City
DUBLINState
GAZip Code
31021-0347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARL VINSON VAOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338404

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SACKMAN, TINA, , ,

Mailing Address 136 LIBRARY AVENUE

City

WARRENSBURG

State

NY

Zip Code

12885-1260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338349

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City

LANCASTER

State

PA

Zip Code

17601-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338422

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 785 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPEVAK, IRINA, , ,

Mailing Address 9512 KEELER AVENUE

City
SKOKIEState
ILZip Code
60076-1445FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338435

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City

NEWPORT BEACH

State
CAZip Code
92660-7120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338344

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City

NEWPORT BEACH

State
CAZip Code
92660-7120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338481

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 786 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TESAR, MICHAEL, , ,

Mailing Address 10 AURORA DRIVE

City
ROLLING HILLS ESTA

State
CA

Zip Code
90274-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1843.74

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338389

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIPTON, ANCEL, , ,

Mailing Address 2040 SHEFFIELD DRIVE

City
JACKSON

State
MS

Zip Code
39211-5848

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.05

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338327

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TONKER, WANDA, , ,

Mailing Address 436 RIVER RUN DRIVE

City
PALMYRA

State
VA

Zip Code
22963-4251

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

229.35

Date of Receipt

09 / 04 / 2022

Transaction ID : SA17.338436

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 787 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIREState
MIZip Code
49615-9378FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338348

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLARDSSEN, JOHN, , ,

Mailing Address 7 VINTAGE DR.

City
NEWPORT BEACHState
CAZip Code
92660-4293FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338502

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, DONNA, , ,

Mailing Address 26 DURANGO ROAD

City
MONTGOMERYState
ILZip Code
60538-2320FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2022

Transaction ID : SA17.338412

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 788 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZAREMBO, CATHERINE, , ,

Mailing Address 49 WHITMAN ROAD

City
MADISON

State
CT

Zip Code
06443-1885

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

09 / **04** / **2022**

Transaction ID : SA17.338373

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

09 / **05** / **2022**

Transaction ID : SA17.338510

Amount of Each Receipt this Period

1192.36

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTA

State
FL

Zip Code
34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

09 / **05** / **2022**

Transaction ID : SA17.339031

Amount of Each Receipt this Period

0.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 789 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339032

Amount of Each Receipt this Period

3.33

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339034

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339036

Amount of Each Receipt this Period

0.25

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

3.93

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 790 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARRANCO, CATHERINE, , ,

Mailing Address 66435 ACOMA AVENUE

City
DESERT HOT SPRINGS

State
CA

Zip Code
92240-3985

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DESERT PROPERTIES

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338738

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BENEDETTO, SUZANNE, , ,

Mailing Address 23 STRATTON

City
MIDDLETOWN

State
NY

Zip Code
10940-3113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAIN STREET TITLE SETTLEMENT SVCS

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338620

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BISHOP, LYNDIA, , ,

Mailing Address 2424 GA HWY 305

City
MIDVILLE

State
GA

Zip Code
30441-3701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338798

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 791 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLANKENSHIP, KATHY, , ,

Mailing Address 125 ORCHARD DR.

City
ELIDAState
OHZip Code
45807-1084FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338621

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BLANKENSHIP, KATHY, , ,

Mailing Address 125 ORCHARD DR.

City
ELIDAState
OHZip Code
45807-1084FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339082

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOBEE, THOMAS. G, , ,

Mailing Address 8167 GARY AVE

City
WESTLANDState
MIZip Code
48185-7083FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339111

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.20

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 792 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2022

Transaction ID : SA17.338843

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BORNTRAGER, ELSIE, , ,

Mailing Address 3219 MALLARD LANE

City
GOSHENState
INZip Code
46526-6196FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NATURAL BODY BALANCEOccupation (for Individual)
NUTRITIONAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2022

Transaction ID : SA17.338679

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2022

Transaction ID : SA17.338641

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 793 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAREY, ILDIKO, , ,

Mailing Address 135 JAMES DRIVE

City
SAYLORSBURG

State
PA

Zip Code
18353-7773

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

679.22

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339006

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARLSON, MARGARET, , ,

Mailing Address 4403 PIONEER ROAD APT262

City
ALEXANDRIA

State
MN

Zip Code
56308-9240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.35

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338566

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEAVER, ROY, , ,

Mailing Address P.O. BOX 41

City
RHOME

State
TX

Zip Code
76078-0041

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

295.70

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339041

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 794 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTE

State
CA

Zip Code
92673-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338610

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTE

State
CA

Zip Code
92673-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338615

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339090

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 795 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339091

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339092

Amount of Each Receipt this Period

11.11

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339093

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

12.81

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GORDON, LOUISE, , ,

Mailing Address 4075 BROOKS MILL DRIVE

City
LITHONIA

State
GA

Zip Code
30038-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.97

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338779

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338582

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338934

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 797 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAYES, BRUCE, , ,

Mailing Address 126 ANDOVER LN

City
HUNTSVILLE

State
AL

Zip Code
35811-8630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.70

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338668

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HERNDON, LARRY, , ,

Mailing Address 3185 COLLEGE AVENUE

City
CONWAY

State
AR

Zip Code
72034-7264

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.70

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338705

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HERNDON, LARRY, , ,

Mailing Address 3185 COLLEGE AVENUE

City
CONWAY

State
AR

Zip Code
72034-7264

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.70

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338706

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 798 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEUSSER, SYDNEY, , ,

Mailing Address P. I. BOX1658

City
DAWSONVILLE

State
GA

Zip Code
30534-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338564

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLMES, THERESA, , ,

Mailing Address PAO BOX 2723

City
SHALLOTTE

State
NC

Zip Code
28459-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRITE PROPERTIES

Occupation (for Individual)
PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338868

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, LARRY, , ,

Mailing Address 1985 MOUNT ZION CHURCH ROAD

City
NASHVILLE

State
NC

Zip Code
27856-7666

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ELECTRICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338580

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 799 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338929

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338936

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338938

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

35.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 800 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338940

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEE, STUART, , ,

Mailing Address 1575 ROBSHEAL DRIVE

City

SAN JOSE

State

CA

Zip Code

95125-4669

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HI DEF AUDIO VIDEOOccupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338674

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOVE, CARMON, , ,

Mailing Address 6825 ADVENT CIRCLE

City

TRUSSVILLE

State

AL

Zip Code

35173-2292

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339066

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 801 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LYMYCH, MARC, , ,

Mailing Address 1720 NE 11TH STREET

City
FORT LAUDERDALE

State
FL

Zip Code
33304-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339033

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYMYCH, MARC, , ,

Mailing Address 1720 NE 11TH STREET

City
FORT LAUDERDALE

State
FL

Zip Code
33304-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339035

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANGOLD, MARIE, , ,

Mailing Address 5101 239TH PL SW

City
MOUNTLAKE TERRACE

State
WA

Zip Code
98043-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338654

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 802 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCSHEA, RITA, , ,

Mailing Address 18 COUNTRY BLUFF COURT

City
SAINT CHARLES

State
MO

Zip Code
63301-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338745

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCSHEA, RITA, , ,

Mailing Address 18 COUNTRY BLUFF COURT

City
SAINT CHARLES

State
MO

Zip Code
63301-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338746

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338661

Amount of Each Receipt this Period

1.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

7.01

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 803 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338662

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338664

Amount of Each Receipt this Period

1.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338665

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

6.71

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 804 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338666

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338970

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

223.52

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338976

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 805 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338982

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338984

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUMENTHALER, FREDERICK, , ,

Mailing Address 100 OXFORD ROAD

City
LANSDALE

State
PA

Zip Code
19446-4758

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

918.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338717

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

17.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 806 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUMENTHALER, FREDERICK, , ,

Mailing Address 100 OXFORD ROAD

City
LANSDALEState
PAZip Code
19446-4758FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

918.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338719

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUMENTHALER, FREDERICK, , ,

Mailing Address 100 OXFORD ROAD

City
LANSDALEState
PAZip Code
19446-4758FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

918.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338781

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PICATTI SMITH, BETTI JO, , ,

Mailing Address 2002 SO 89TH AVE

City
YAKIMAState
WAZip Code
98903-9283FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338875

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 807 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATERState
FLZip Code
33764-3724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338826

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSS, ERROL, , ,

Mailing Address 265 CONKLIN ST

City
FARMINGDALEState
NYZip Code
11735-2661FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARDSCRABBLEOccupation (for Individual)
BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339102

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSS, ERROL, , ,

Mailing Address 265 CONKLIN ST

City
FARMINGDALEState
NYZip Code
11735-2661FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARDSCRABBLEOccupation (for Individual)
BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

378.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339103

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 808 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKON

State
OK

Zip Code
73099-5781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338677

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKON

State
OK

Zip Code
73099-5781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338811

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANLEY, NORVAL, , ,

Mailing Address 795 MAIN ST.

City
ACUSHNET

State
MA

Zip Code
02743-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BERGIES SFD INC

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

363.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339051

Amount of Each Receipt this Period

16.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 809 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STANLEY, NORVAL, , ,

Mailing Address 795 MAIN ST.

City
ACUSHNETState
MAZip Code
02743-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BERGIES SFD INCOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339054

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIETZEL, MARILYN, , ,

Mailing Address 14642 474TH AVENUE

City
MILBANKState
SDZip Code
57252-5404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338842

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STROUP, JUDIE, , ,

Mailing Address 858 GRAND HARBOUR W

City
MIRAMAR BEACHState
FLZip Code
32550-4813FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1044.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339030

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 810 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338908

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338912

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.338937

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 811 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338939

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338944

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.338947

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 812 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338951

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338953

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TESAR, MICHAEL, , ,

Mailing Address 10 AURORA DRIVE

City
ROLLING HILLS ESTA

State
CA

Zip Code
90274-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1843.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338645

Amount of Each Receipt this Period

0.47

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

1.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 813 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339118

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339119

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339120

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 814 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339121

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339122

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339123

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 815 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339124

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YTURALDE, CHRISTINA, , ,

Mailing Address 325 E. FIFTH STREET

City
CALEXICOState
CAZip Code
92231-2765FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.338776

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339140

Amount of Each Receipt this Period

3637.78

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 816 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDROS, ANN, , ,

Mailing Address P O BOX 3651

City
CARMEL BY THE SEA

State
CA

Zip Code
93921-3651

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1878.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339156

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339215

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTON

State
TX

Zip Code
77035-4222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339216

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

108.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 817 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLONState
ILZip Code
62269-3142FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339267

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEAM, K KIM, , ,

Mailing Address 650 QUAIL RUN

City
O'FALLONState
ILZip Code
62269-3142FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2034.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.350577

Amount of Each Receipt this Period

- 25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENAVIDES, GLORIA J, , ,

Mailing Address 146 MARLENA DR.

City
SAN ANTONIOState
TXZip Code
78213-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339165

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 818 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLANKENSHIP, KATHY, , ,

Mailing Address 125 ORCHARD DR.

City
ELIDA

State
OH

Zip Code
45807-1084

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.84

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339310

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BODKIN, RICHARD, , ,

Mailing Address 5130 WESCOTT BLVD

City

SUMMERVILLE

State

SC

Zip Code

29485-9043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.50

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339304

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BODKIN, RICHARD, , ,

Mailing Address 5130 WESCOTT BLVD

City

SUMMERVILLE

State

SC

Zip Code

29485-9043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.50

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339305

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 819 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOLLWARK, CATHERINE L, , ,

Mailing Address 5 DELWOOD RD BX 485

City
CHESTER

State
NJ

Zip Code
07930-2126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339147

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERS

State
OR

Zip Code
97759-8000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339214

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERS

State
OR

Zip Code
97759-8000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339240

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

290.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRYANT, MARY, , ,

Mailing Address 1700 PARK SHORE ROAD

City
LA GRANGE

State
KY

Zip Code
40031-8024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339237

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CALASCIONE, PATRICIA, , ,

Mailing Address 46 BAY 20 STREET

City
BROOKLYN

State
NY

Zip Code
11214-3802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY PRO GROUP,INC

Occupation (for Individual)
EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339260

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARSON, LARRY, , ,

Mailing Address 212 BAY LAUREL WAY

City
SIMPSONVILLE

State
SC

Zip Code
29681-3721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339166

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 821 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHANCELLOR CASE, NANCY, , ,

Mailing Address 24001 CINCO VILLAGE CENTER BOULEVA

City
KATYState
TXZip Code
77494-8419FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339225

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHANCELLOR CASE, NANCY, , ,

Mailing Address 24001 CINCO VILLAGE CENTER BOULEVA

City
KATYState
TXZip Code
77494-8419FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339226

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLD, PAUL, , ,

Mailing Address 5009 PINEVIEW TERRACE

City
FAYETTEVILLEState
GAZip Code
30214-1031FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339239

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 822 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTE

State
CA

Zip Code
92673-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339149

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DILEONARDO, ELLA, , ,

Mailing Address 8278 SE ANGELINA COURT

City
HOBE SOUND

State
FL

Zip Code
33455-8946

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339248

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DILEONARDO, ELLA, , ,

Mailing Address 8278 SE ANGELINA COURT

City
HOBE SOUND

State
FL

Zip Code
33455-8946

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339249

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

30.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 823 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ECHOLS, ELIZABETH, , ,

Mailing Address 369 HUNTINGTON LAKE CIRCLE

City
PAWLEYS ISLAND

State
SC

Zip Code
29585-6174

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339300

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EFFRAY, LOIS, , ,

Mailing Address 527 HOLCOMB ROAD

City
KELSO

State
WA

Zip Code
98626-9386

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
HOUSE WIFE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339293

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARRELL, ROBERT, , ,

Mailing Address 651 BERING, 403

City
HOUSTON

State
TX

Zip Code
77057-2100

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
OIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339326

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

27.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 824 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GALINDO, HENRY, , ,

Mailing Address 4561 NORTH RINARD AVENUE

City
COVINA

State
CA

Zip Code
91722-3242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.70

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339162

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOOD, LYNDA, , ,

Mailing Address 2948 WEAVER RD

City
LANCASTER

State
PA

Zip Code
17601-2961

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339192

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORDON, LOUISE, , ,

Mailing Address 4075 BROOKS MILL DRIVE

City
LITHONIA

State
GA

Zip Code
30038-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

499.97

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339277

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 825 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339282

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339283

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.50

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339285

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 826 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

09 / **05** / **2022**

Transaction ID : SA17.339287

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

09 / **05** / **2022**

Transaction ID : SA17.339289

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.50

Date of Receipt

09 / **05** / **2022**

Transaction ID : SA17.339291

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 827 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City

LAKE PANASOFFKEE

State

FL

Zip Code

33538-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.71

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339230

Amount of Each Receipt this Period

2.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANAR, DIANA, , ,

Mailing Address P.O. BOX 149

City

PLUMMER

State

ID

Zip Code

83851-0149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339324

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANAR, DIANA, , ,

Mailing Address P.O. BOX 149

City

PLUMMER

State

ID

Zip Code

83851-0149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339325

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

42.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 828 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HANNES, JOHANNE, , ,

Mailing Address 979 YUCATAN COURT

City
FREMONT

State
CA

Zip Code
94539-7137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 05 / 2022

Transaction ID : SA17.339186

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HANSON, SHERRY M., , ,

Mailing Address 3000 N. PORTAGE AVENUE

City
GRAYLING

State
MI

Zip Code
49738-8500

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 05 / 2022

Transaction ID : SA17.339176

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HANSON, SHERRY M., , ,

Mailing Address 3000 N. PORTAGE AVENUE

City
GRAYLING

State
MI

Zip Code
49738-8500

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 05 / 2022

Transaction ID : SA17.339177

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 829 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONTState
ILZip Code
61568-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339168

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYES, BRUCE, , ,

Mailing Address 126 ANDOVER LN

City
HUNTSVILLEState
ALZip Code
35811-8630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339295

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HINKLE, MARTHA, , ,

Mailing Address 3615 , WENTWORTH DRIVE

City
ARLINGTONState
TXZip Code
76001-5255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339286

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 830 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HINKLE, MARTHA, , ,

Mailing Address 3615 , WENTWORTH DRIVE

City
ARLINGTON

State
TX

Zip Code
76001-5255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339290

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUEHNE, CARL, , ,

Mailing Address 4479 HERITAGE HEIGHTS ROAD

City
DE PERE

State
WI

Zip Code
54115-9254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CK HOLDINGS

Occupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339257

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUEHNE, CARL, , ,

Mailing Address 4479 HERITAGE HEIGHTS ROAD

City
DE PERE

State
WI

Zip Code
54115-9254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CK HOLDINGS

Occupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339258

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339150

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339279

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339280

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 832 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCracken, MaryK K, , ,

Mailing Address 1535 CEDARHURST DRIVE

City
ATLANTA

State
GA

Zip Code
30338-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY
09 / 05 / 2022

Transaction ID : SA17.339333

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MISH, ALICE, , ,

Mailing Address 17234 NORTHEAST 126TH PLACE

City
REDMOND

State
WA

Zip Code
98052-2292

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY
09 / 05 / 2022

Transaction ID : SA17.339181

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, GREGORY, , ,

Mailing Address 1002 EAST 2ND AVENUE

City
BELTON

State
TX

Zip Code
76513-3206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MACEOMATIC

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

MM / DD / YYYY
09 / 05 / 2022

Transaction ID : SA17.339197

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 833 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, GREGORY, , ,

Mailing Address 1002 EAST 2ND AVENUE

City
BELTONState
TXZip Code
76513-3206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MACEOMATICOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	2	2		

Transaction ID : SA17.339198

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORGAN, WILLIAM, , ,

Mailing Address 453 NORTH 450 WEST

City
AMERICAN FORKState
UTZip Code
84003-5168FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	2	2		

Transaction ID : SA17.339199

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICHOLS, MAY, , ,

Mailing Address 1795 MOUNT PLEASANT ROAD

City
BEECH BLUFFState
TNZip Code
38313-1714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	2	2		

Transaction ID : SA17.339151

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 834 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339183

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339184

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339185

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 835 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339188

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339190

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339191

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 836 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEACH, MARY B, , ,

Mailing Address 909 BEACON DRIVE

City
CLARKSVILLEState
TNZip Code
37043-5211FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339161

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PURNELL, MIKE, , ,

Mailing Address 303 BUCK SWAMP ROAD

City
BRUNSWICKState
GAZip Code
31523-7044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339307

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RATLIFF, DEBRA, , ,

Mailing Address 2006 EAST LOGAN STREET

City
REPUBLICState
MOZip Code
65738-1269FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2022

Transaction ID : SA17.339195

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

110.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 837 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RATLIFF, DEBRA, , ,

Mailing Address 2006 EAST LOGAN STREET

City
REPUBLIC

State
MO

Zip Code
65738-1269

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339196

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIEPE, MARY, , ,

Mailing Address 6515 PARKDALE COURT

City
DAVENPORT

State
IA

Zip Code
52807-3350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339229

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSE, JUDAH, , ,

Mailing Address 2812 R STREET NW

City
WASHINGTON

State
DC

Zip Code
20007-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

901.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339206

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 838 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTER

State
PA

Zip Code
17601-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339231

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTER

State
PA

Zip Code
17601-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339232

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTER

State
PA

Zip Code
17601-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339233

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 839 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SOUKUP, MA, , ,

Mailing Address 6 WOODCOCK LANE

City
LINCOLN

State
MA

Zip Code
01773-4513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.00

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339265

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOUKUP, MA, , ,

Mailing Address 6 WOODCOCK LANE

City
LINCOLN

State
MA

Zip Code
01773-4513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.00

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339266

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAYLOR, SANDRA, , ,

Mailing Address 1548 VALENCIA AVENUE

City
DAYTONA BEACH

State
FL

Zip Code
32117-1436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 05 / 2022

Transaction ID : SA17.339171

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 840 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TOMASIK, LORI, , ,

Mailing Address 157 RESERVOIR ROAD

City
PARSIPPANYState
NJZip Code
07054-1379FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DANMARCOccupation (for Individual)
ADMN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339187

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VARNEY, CARLETON, , ,

Mailing Address 60 EAST 56 STREET, 10 FLOOR

City
NEW YORKState
NYZip Code
10022-3280FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOROTHY DRAPER COOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339308

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATSON, CLIFFORD, , ,

Mailing Address 600 WEST DRIVE

City
GLEN BURNIEState
MDZip Code
21061-2035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

436.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339281

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 841 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339270

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITEMAN, KEITH, , ,

Mailing Address 2671 DAISY LANE

City
FALLBROOK

State
CA

Zip Code
92028-9591

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339170

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINGARD, RUTH Y., , ,

Mailing Address 2543 W 8TH APT 202

City
ERIE

State
PA

Zip Code
16505-4437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339159

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 842 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZUCKER, ILONA, , ,

Mailing Address 1900 CONSULATE PLACE

City
WEST PALM BEACH

State
FL

Zip Code
33401-1816

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339245

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZUCKER, ILONA, , ,

Mailing Address 1900 CONSULATE PLACE

City
WEST PALM BEACH

State
FL

Zip Code
33401-1816

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339246

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZUCKER, ILONA, , ,

Mailing Address 1900 CONSULATE PLACE

City
WEST PALM BEACH

State
FL

Zip Code
33401-1816

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

841.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2022

Transaction ID : SA17.339247

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 843 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRUZADA, CRISTETA, , ,

Mailing Address 4559 KAWILLA CREST PLACE

City
WINTER PARK

State
FL

Zip Code
32792-7638

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.350520

Amount of Each Receipt this Period

- 100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339338

Amount of Each Receipt this Period

1219.85

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTA

State
FL

Zip Code
34243-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339840

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

- 99.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 844 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339861

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339862

Amount of Each Receipt this Period

3.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AVERY, ELAINE, , ,

Mailing Address 7288 WEST COUNTRY CLUB DRIVE NORTH

City
SARASOTAState
FLZip Code
34243-3527FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1196.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339865

Amount of Each Receipt this Period

0.18

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

5.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 845 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BABCOCK, PAUL, , ,

Mailing Address P.O. BOX 661

City
SAG HARBOR

State
NY

Zip Code
11963-0017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PROP MNGMNT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339729

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BERKGREN, GARRY D, , ,

Mailing Address 122 PLUM AVE

City
OAKLEY

State
KS

Zip Code
67748-1248

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5935.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339992

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEST, SAMMY, , ,

Mailing Address 1807FM 3240

City
BANDERA

State
TX

Zip Code
78003-5233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339353

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 846 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BEST, SAMMY, , ,**

Mailing Address 1807FM 3240

City
BANDERA

State
TX

Zip Code
78003-5233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339354

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **BOLINGER, REBA, , ,**

Mailing Address 543 W 6TH ST

City
LITITZ

State
PA

Zip Code
17543-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339759

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **BONIN, JUDY, , ,**

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340007

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 847 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339986

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRACHFELD, DONALD, , ,

Mailing Address 25 FOUR SEASONS DRIVE

City
NORTH CALDWELLState
NJZip Code
07006-6134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339987

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRACHFELD, DONALD, , ,

Mailing Address 25 FOUR SEASONS DRIVE

City
NORTH CALDWELLState
NJZip Code
07006-6134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

811.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339988

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.60

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 848 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339359

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CROW, DAVID, , ,

Mailing Address 4010 RAVENSWAY COURT

City
PEARLAND

State
TX

Zip Code
77584-7780

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.70

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339588

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGE

State
NJ

Zip Code
08514-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

447.13

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339956

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 849 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIDRICH, HEINZ, , ,

Mailing Address 131 LONG POINT DRIVE

City
FERNANDINA BEACH

State
FL

Zip Code
32034-6410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.25

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339894

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GATTI, PATRICIA, , ,

Mailing Address 1706 EAST 52ND STREET

City
BROOKLYN

State
NY

Zip Code
11234-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.87

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339341

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339965

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.47

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 850 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIBB, JOAN, , ,

Mailing Address 570 OCEAN DRIVE

City
JUNO BEACH

State
FL

Zip Code
33408-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2356.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339967

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GROTE, ADRIENNE, , ,

Mailing Address 116 CENTENNIAL ST

City
SANTA CRUZ

State
CA

Zip Code
95060-6502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339900

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339508

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 851 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GWIN, WENDY, , ,

Mailing Address 4790 NORTHEAST 29TH COURT

City
 REDMOND

State
 OR

Zip Code
 97756-7461

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2022

Transaction ID : SA17.339387

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEUSSER, SYDNEY, , ,

Mailing Address P. I. BOX1658

City
 DAWSONVILLE

State
 GA

Zip Code
 30534-

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2022

Transaction ID : SA17.339599

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOFFMAN, JEFFREY, , ,

Mailing Address 318 NOEL DRIVE

City
 MONROEVILLE

State
 PA

Zip Code
 15146-1524

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

465.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2022

Transaction ID : SA17.339853

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

70.35

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 852 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JAMES, JERRY, , ,

Mailing Address 409-42 AVE.

City
GREELEYState
COZip Code
80634-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
O-IOccupation (for Individual)
MOLD TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339512

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KUHN, DANIEL, , ,

Mailing Address 185 NORTH FOURTH STREET 2

City
PORTOLAState
CAZip Code
96122-8216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339812

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEETUN, JEFFREY, , ,

Mailing Address 1325 GRASSLANDS BLVD, , , ,

City
LAKELANDState
FLZip Code
33803-5405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339781

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 853 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MALVICH, LINDA, , ,

Mailing Address BOX 156

City
HOLLY

State
MI

Zip Code
48442-0156

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.35

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339790

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARROCCOLI, ANGELA, , ,

Mailing Address 3801N.E.207ST. 2902

City
AVENTURA

State
FL

Zip Code
33180-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1424.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339898

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCKAY, CHRISTINA, , ,

Mailing Address 6114 LICKTON PIKE

City
GOODLETTSVILLE

State
TN

Zip Code
37072-9147

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.70

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339779

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

1.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 854 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339978

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOBLEY, TYMA, , ,

Mailing Address 23917 PEDERNALES DRIVE

City
SPICEWOOD

State
TX

Zip Code
78669-1491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
R.N. NICU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339775

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOBLEY, TYMA, , ,

Mailing Address 23917 PEDERNALES DRIVE

City
SPICEWOOD

State
TX

Zip Code
78669-1491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
R.N. NICU

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339778

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 855 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339621

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339623

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339626

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

18.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 856 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OSTER, MARLENE, , ,

Mailing Address 2859 DAISYBROOK ST NW

City
NORTH CANTON

State
OH

Zip Code
44720-8168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OSTER ENTERPRISES

Occupation (for Individual)
OFFICE MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.02

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339897

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETRY, JUDITH, , ,

Mailing Address 1111 BENTWOOD PLACE CT

City
LOUISVILLE

State
KY

Zip Code
40207-2303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.75

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339976

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PICATTI SMITH, BETTI JO, , ,

Mailing Address 2002 SO 89TH AVE

City
YAKIMA

State
WA

Zip Code
98903-9283

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.55

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339721

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.80

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 857 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATERState
FLZip Code
33764-3724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339505

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSEN, CARL, , ,

Mailing Address 2046 US HWY 441N

City
DUBLINState
GAZip Code
31021-0347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARL VINSON VAOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339707

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROTH, DEIDRE, , ,

Mailing Address 2721 WEST GULF DRIVE

City
SANIBELState
FLZip Code
33957-5914FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

371.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339958

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 858 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHERMBECK, JULIE, , ,

Mailing Address 2043 HAMILTON NEW LONDON RD

City
HAMILTON

State
OH

Zip Code
45013-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339844

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHOLLE, VICTORIA, , ,

Mailing Address 4824 BAYARD ST

City
SAN DIEGO

State
CA

Zip Code
92109-2524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339397

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHOLLE, VICTORIA, , ,

Mailing Address 4824 BAYARD ST

City
SAN DIEGO

State
CA

Zip Code
92109-2524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339399

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 859 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHOLLE, VICTORIA, , ,

Mailing Address 4824 BAYARD ST

City
SAN DIEGO

State
CA

Zip Code
92109-2524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.90

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339400

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHELTON, JANICE, , ,

Mailing Address 152 MASSEY RD

City
LOCUST FORK

State
AL

Zip Code
35097-5934

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.70

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339916

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMON, PATRICIA, , ,

Mailing Address 11823 FAIRWAY DR.

City
LITTLE ROCK

State
AR

Zip Code
72212-3422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339741

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 860 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339678

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339681

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339686

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 861 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339690

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339692

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.339694

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

4.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 862 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VASQUEZ, RANDOLPH, , ,

Mailing Address 1010 KEENE DRIVE

City
LA HABRAState
CAZip Code
90631-7150FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339432

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEISS, MARIE, , ,

Mailing Address 74 SPRINGTIME ROAD

City
ELWOODState
NYZip Code
11731-4832FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339506

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIREState
MIZip Code
49615-9378FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

313.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.339745

Amount of Each Receipt this Period

0.12

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 863 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITY

State
FL

Zip Code
33868-5113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339785

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WITKINS, NORMAN, , ,

Mailing Address 2625 IVA COURT UNIT 24

City
BELOIT

State
WI

Zip Code
53511-6614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.339533

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340054

Amount of Each Receipt this Period

2335.50

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 864 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAMIC, DAVID, , ,

Mailing Address 810 SAINT JOHN PLACE

City
HEMET

State
CA

Zip Code
92543-4414

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DR. DAVID ADAMIC APDC

Occupation (for Individual)
ENDODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340092

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALAMPI, JAMES, , ,

Mailing Address 5250 BRONCO DRIVE

City

CLARKSTON

State

MI

Zip Code

48346-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340079

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DALE, ANNEMARIE, , ,

Mailing Address 2623 ESPINOZA STREET

City

TRINIDAD

State

CO

Zip Code

81082-3936

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

530.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340066

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 865 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DANIELS, DENISE, , ,

Mailing Address 5223 LARADA LN

City
EDINA

State
MN

Zip Code
55436-1082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JELLYJAM ENTERTAINMENT

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340057

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, HOWARD, , ,

Mailing Address 102703 EAST 1023 PR SOUTHEAST

City
KENNEWICK

State
WA

Zip Code
99338-1138

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340141

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEPARIS, FREDERIC, , ,

Mailing Address 540 HOWE ST

City
METHUEN

State
MA

Zip Code
01844-1240

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

610.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340130

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 866 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEVETTE, JACK, , ,

Mailing Address 8610 GARBOW DR. SE

City
ALTO

State
MI

Zip Code
49302-9166

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340127

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EATON, RANDY, , ,

Mailing Address 513 EAST 2ND AVE.

City
INDIANOLA

State
IA

Zip Code
50125-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340089

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EFFRAY, LOIS, , ,

Mailing Address 527 HOLCOMB ROAD

City
KELSO

State
WA

Zip Code
98626-9386

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
HOUSE WIFE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340062

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 867 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLYNN, DAN JOAN, , ,

Mailing Address 17421 N FLICKER AV

City
NAMPA

State
ID

Zip Code
83687-4835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340119

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOGARTY, JOY, , ,

Mailing Address 10209 EAST CALYPSO AVENUE

City
MESA

State
AZ

Zip Code
85208-7409

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.40

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340061

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FULLER, J L, , ,

Mailing Address 65 BINSTED DRIVE

City
MEDFORD

State
NJ

Zip Code
08055-9561

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340071

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 868 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GATES, ROCHELL, , ,

Mailing Address 385 EAST SALEM PARK CIRCLE

City
SALEM

State
UT

Zip Code
84653-5584

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JAT

Occupation (for Individual)
RECEPTIONIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340105

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESECKE, RICHARD, , ,

Mailing Address 1807 HWY281 STE 4

City

MARBLE FALLS

State

TX

Zip Code

78654-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340099

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KANN, BOB, , ,

Mailing Address 2206 FRIARS LEGENDS DR.

City

SPRING

State

TX

Zip Code

77386-3386

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340083

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 869 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, DRUE, , ,

Mailing Address P.O. BOX 982

City

WEST BROOKFIELD

State

MA

Zip Code

01585-0982

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340103

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNOEBEL, RICHARD, , ,

Mailing Address 206 KNOEBELS BOULEVARD

City

ELYSBURG

State

PA

Zip Code

17824-7125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340106

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOZIAL, ELIZABETH, , ,

Mailing Address 4604 CRELLMAN WAY

City

KANNAPOLIS

State

NC

Zip Code

28081-7523

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340058

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 870 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEONARD, LUANNE, , ,

Mailing Address 36560 SAGUARO COURT

City

RANCHO MIRAGE

State

CA

Zip Code

92270-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1404.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.340135

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUSTIK, THOMAS, , ,

Mailing Address 51680 JAMES LAWRENCE PKWY

City

GRANGER

State

IN

Zip Code

46530-5630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.340108

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUSTIK, THOMAS, , ,

Mailing Address 51680 JAMES LAWRENCE PKWY

City

GRANGER

State

IN

Zip Code

46530-5630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

371.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.340109

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 871 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARTINO, VICKIE, , ,

Mailing Address 2200 LATHAM ST

City
BAKERSFIELD

State
CA

Zip Code
93306-4902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 06 / 2022

Transaction ID : SA17.340068

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEAL, ROLLIE, , ,

Mailing Address 17 LARKSPUR LN

City
CLARKSBURG

State
WV

Zip Code
26301-6871

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 06 / 2022

Transaction ID : SA17.340082

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NYE, BRUCE, , ,

Mailing Address 75209 KIOWA

City
INDIAN WELLS

State
CA

Zip Code
92210-8328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE LANGLOIS COMPANY

Occupation (for Individual)
BOARD MEMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 06 / 2022

Transaction ID : SA17.340091

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 872 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OCONNOR, JAMES, , ,

Mailing Address 2520 LINDENWOOD DR.

City
PITTSBURGH

State
PA

Zip Code
15241-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GSL

Occupation (for Individual)
LANDSCAPING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

854.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.340097

Amount of Each Receipt this Period

6.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OVERSTREET, PATSY A, , ,

Mailing Address 58079 DOW TRAIL

City
HANNIBAL

State
MO

Zip Code
63401-7698

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.340131

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OVERSTREET, PATSY A, , ,

Mailing Address 58079 DOW TRAIL

City
HANNIBAL

State
MO

Zip Code
63401-7698

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2022

Transaction ID : SA17.340132

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

61.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 873 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEEK, ALLAN, , ,

Mailing Address 80 ROBY REEVES ROAD

City
SYCAMORE

State
GA

Zip Code
31790-2400

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340134

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETRY, JUDITH, , ,

Mailing Address 1111 BENTWOOD PLACE CT

City
LOUISVILLE

State
KY

Zip Code
40207-2303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.75

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340056

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RANDALL, BRUCE, , ,

Mailing Address 6182 BROCKDELL RD

City
PIKEVILLE

State
TN

Zip Code
37367-6025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

09 / 06 / 2022

Transaction ID : SA17.340065

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 874 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANSING, BETTY, , ,

Mailing Address 5599 HIGHWAY 70

City
CLARENDONState
TXZip Code
79226-4004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1302.50

Date of Receipt

M M	D D	Y Y Y Y
09	06	2022

Transaction ID : SA17.340086

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACHState
CAZip Code
92660-7120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M	D D	Y Y Y Y
09	06	2022

Transaction ID : SA17.340059

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACHState
CAZip Code
92660-7120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M	D D	Y Y Y Y
09	06	2022

Transaction ID : SA17.340096

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 875 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340102

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA17.340100

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENSON, MAYLON, , ,

Mailing Address 2518HWY 82E

City
POULAN

State
GA

Zip Code
31781-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.350440

Amount of Each Receipt this Period

- 20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 876 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHENAULT, MELISSA, , ,

Mailing Address P.O. BOX 93

City
OMENAState
MIZip Code
49674-0093FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.350435

Amount of Each Receipt this Period

- 25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHENAULT, MELISSA, , ,

Mailing Address P.O. BOX 93

City
OMENAState
MIZip Code
49674-0093FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.350441

Amount of Each Receipt this Period

- 25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHENAULT, MELISSA, , ,

Mailing Address P.O. BOX 93

City
OMENAState
MIZip Code
49674-0093FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.350486

Amount of Each Receipt this Period

- 50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ►

- 100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 877 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHENAULT, MELISSA, , ,

Mailing Address P.O. BOX 93

City
OMENA

State
MI

Zip Code
49674-0093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.350487

Amount of Each Receipt this Period

– 50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHENAULT, MELISSA, , ,

Mailing Address P.O. BOX 93

City
OMENA

State
MI

Zip Code
49674-0093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.350517

Amount of Each Receipt this Period

– 50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SESSIONS, JAMIE, , ,

Mailing Address 313 MOHAWK RD SE

City
OWENS CROSS ROADS

State
AL

Zip Code
35763-9251

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

289.90

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.350289

Amount of Each Receipt this Period

– 0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

– 100.15

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 878 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NATHANIEL QUENTIN MORAN CAMPAIGN ACCOUNT

Mailing Address 1590 HOLCOMB CIR

City
TYLERState
TXZip Code
75703-0813FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2022

Transaction ID : SA17.345140

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEREGRINE OIL & GAS HOLDCO, LLC.Mailing Address 675 BERING DRIVE
SUITE 620City
HOUSTONState
TXZip Code
77057-2128FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2022

Transaction ID : SA17.345139

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		07		2022

Transaction ID : SA17.340142

Amount of Each Receipt this Period

1097.40

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶

30000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 879 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340255

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARLTON, STEVEN, , ,

Mailing Address 43 WHITE CLIFFS DR.

City
PLYMOUTHState
MAZip Code
02360-8009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340543

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340423

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 880 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLIOTT, JODI, , ,

Mailing Address P.O.BOX 756

City
ORLAND

State
CA

Zip Code
95963-0756

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.70

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340206

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FANKHANEL, PAMELA, , ,

Mailing Address 12216 IRVINE AVENUE NORTHWEST

City
BEMIDJI

State
MN

Zip Code
56601-7106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.80

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340561

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARRELL, PATRICIA, , ,

Mailing Address 192 HEATHERTON WAY

City
WINSTON SALEM

State
NC

Zip Code
27104-4446

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

316.40

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340531

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 881 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340553

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340555

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340556

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIERACH, JOHN, , ,

Mailing Address 723 E. COLONIAL DR.

City
ORLANDO

State
FL

Zip Code
32803-4662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GIERACH AND GIERACH P.A.

Occupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.55

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340567

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City

RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340204

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City

RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.60

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340205

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 883 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GWIN, WENDY, , ,

Mailing Address 4790 NORTHEAST 29TH COURT

City
REDMOND

State
OR

Zip Code
97756-7461

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340618

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340371

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINO

State
CA

Zip Code
91710-2066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340154

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 884 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LACKEY, ANN, , ,

Mailing Address 1117 SPRUCE ST

City
LAKE OSWEGO

State
OR

Zip Code
97034-6153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.91

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340599

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANIUS, BARBARA, , ,

Mailing Address 12662 HARRIET CIRCLE

City
DALLAS

State
TX

Zip Code
75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340504

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVY, LINDA, , ,

Mailing Address 9059 SANDERSON COURT

City
BOYNTON BEACH

State
FL

Zip Code
33473-4991

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

470.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340313

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 885 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIMMS, JOY, , ,

Mailing Address 8303 NORFOLK DR.

City
AMARILLO

State
TX

Zip Code
79119-6442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.40

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340264

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORAN, FRANK, , ,

Mailing Address P.O. BOX 4848

City
SHREVEPORT

State
LA

Zip Code
71134-0848

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.65

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340147

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDIN

State
FL

Zip Code
34698-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.45

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340500

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 886 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURRAY, RICHARD, , ,

Mailing Address 2246 SNEAD AVE

City
DUNEDIN

State
FL

Zip Code
34698-2115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340506

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340224

Amount of Each Receipt this Period

6.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340225

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26.81

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 887 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340226

Amount of Each Receipt this Period

6.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340227

Amount of Each Receipt this Period

6.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLEState
FLZip Code
32608-4190FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340228

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

13.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 888 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLINGER, SANDRA, , ,

Mailing Address 4914 SOUTHWEST 95TH TERRACE

City
GAINESVILLE

State
FL

Zip Code
32608-4190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340229

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSTER, MARLENE, , ,

Mailing Address 2859 DAISYBROOK ST NW

City
NORTH CANTON

State
OH

Zip Code
44720-8168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OSTER ENTERPRISES

Occupation (for Individual)
OFFICE MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340302

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETRY, JUDITH, , ,

Mailing Address 1111 BENTWOOD PLACE CT

City
LOUISVILLE

State
KY

Zip Code
40207-2303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340579

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 889 OF 1424

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEONOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340257

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEONOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340626

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATERState
FLZip Code
33764-3724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

512.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340269

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 890 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBERTS, RISE, , ,

Mailing Address 8912 YARMOUTH ROAD

City
JACKSONVILLE

State
FL

Zip Code
32257-5221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.10

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340527

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEKELL, LAWRENCE, , ,

Mailing Address 4 WINTER WAY

City
CHAMPION

State
PA

Zip Code
15622-2088

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340592

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIKES, SCOTT, , ,

Mailing Address 2820 HEATHER RD

City
LONG BEACH

State
CA

Zip Code
90815-1049

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMPLETE EXAMINATIONS, INC

Occupation (for Individual)
EXAMINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

303.40

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340270

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 891 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340314

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLEState
FLZip Code
33772-2660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340288

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATSON, ERIC, , ,

Mailing Address 1000 NE 95TH ST

City
OCALAState
FLZip Code
34479-1160FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340276

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.60

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 892 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340630

Amount of Each Receipt this Period

5273.75

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINEState
MNZip Code
56535-0053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INCOccupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340694

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINEState
MNZip Code
56535-0053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INCOccupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

730.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340696

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 893 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINE

State
MN

Zip Code
56535-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INC

Occupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340697

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINE

State
MN

Zip Code
56535-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INC

Occupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340698

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINE

State
MN

Zip Code
56535-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INC

Occupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

730.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340699

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 894 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALONZO, YOLANDA, , ,

Mailing Address 3673 GILLIG AVENUE

City
LOS ANGELES

State
CA

Zip Code
90031-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340669

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALONZO, YOLANDA, , ,

Mailing Address 3673 GILLIG AVENUE

City
LOS ANGELES

State
CA

Zip Code
90031-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340670

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALONZO, YOLANDA, , ,

Mailing Address 3673 GILLIG AVENUE

City
LOS ANGELES

State
CA

Zip Code
90031-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340671

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 895 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, CHRIS, , ,

Mailing Address 116 PARK AVE

City
CUMBERLANDState
MDZip Code
21502-7100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340636

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ASENSIO, DENNIS, , ,

Mailing Address 6356 HASTINGS LANE

City
LISLEState
ILZip Code
60532-3219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4077.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340761

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCHP

City
SIERRA VISTAState
AZZip Code
85635-5065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340691

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 896 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCHP

City
SIERRA VISTA

State
AZ

Zip Code
85635-5065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340705

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCHP

City
SIERRA VISTA

State
AZ

Zip Code
85635-5065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340707

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCHP

City
SIERRA VISTA

State
AZ

Zip Code
85635-5065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340710

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 897 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BELL, LESTER, , ,

Mailing Address 5421 GILLIONVILLE ROAD

City
ALBANY

State
GA

Zip Code
31721-8937

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340894

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BERSAGLIERI, RONALD, , ,

Mailing Address 6783 CHELTON DRIVE

City
OAKLAND

State
CA

Zip Code
94611-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.35

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340803

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BERSAGLIERI, RONALD, , ,

Mailing Address 6783 CHELTON DRIVE

City
OAKLAND

State
CA

Zip Code
94611-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

251.35

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340804

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 898 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BEST, SAMMY, , ,**

Mailing Address 1807FM 3240

City
BANDERA

State
TX

Zip Code
78003-5233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340849

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **BLANKENSHIP, KATHY, , ,**

Mailing Address 125 ORCHARD DR.

City
ELIDA

State
OH

Zip Code
45807-1084

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340679

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **BONIN, JUDY, , ,**

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340722

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

27.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 899 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BONIN, JUDY, , ,**

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340729

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **BROWN, ERROL, , ,**

Mailing Address P.O. BOX 261

City
CAMERON

State
MT

Zip Code
59720-0261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340771

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **BRUCE, LLOYD, , ,**

Mailing Address 7021 NORTH EDGEWOOD PLACE

City
TUCSON

State
AZ

Zip Code
85704-6924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340649

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 900 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340661

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340662

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTON

State
TX

Zip Code
77079-3182

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340838

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 901 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMAN

State
SC

Zip Code
29349-5600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340709

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340892

Amount of Each Receipt this Period

15.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLES, DAVE, , ,

Mailing Address 8673 WEST FAWN BROOK STREET

City
BOISE

State
ID

Zip Code
83714-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

6140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340751

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 902 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COX, JERRY, , ,

Mailing Address P.O. BOX 95

City
LENORAH

State
TX

Zip Code
79749-0095

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340795

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CUSICK, ROBERT, , ,

Mailing Address 4722 SOUTHWEST DOSCH PARK LANE

City
PORTLAND

State
OR

Zip Code
97239-1284

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340835

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, CYNTHIA, , ,

Mailing Address 32764 RIDGE TOP LANE

City
CASTAIC

State
CA

Zip Code
91384-3082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

335.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340718

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 903 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340737

Amount of Each Receipt this Period

3.60

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340738

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340740

Amount of Each Receipt this Period

20.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 904 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ENGLISH, JANET, , ,

Mailing Address 929 ROLLING WOODS LANE

City
LAKELAND

State
FL

Zip Code
33813-1249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340900

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ESPOSITO, LUIGI, , ,

Mailing Address 2449 ROSSETT STREET

City
FORT LEE

State
NJ

Zip Code
07024-3919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.50

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340685

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GEORGIS, MARLINE, , ,

Mailing Address 580 ARASTRADERO RD, APT 405

City
PALO ALTO

State
CA

Zip Code
94306-3946

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340898

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 905 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOERING, LEROY, , ,

Mailing Address 29497 THE YELLOW BRICK RD

City
VALLEY CENTER

State
CA

Zip Code
92082-7663

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340834

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLES

State
IL

Zip Code
61341-1594

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.05

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340776

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLES

State
IL

Zip Code
61341-1594

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

654.05

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340777

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 906 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLESState
ILZip Code
61341-1594FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340778

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLESState
ILZip Code
61341-1594FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340782

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODMAN, MARY, , ,

Mailing Address 350 ANNHURST DR.

City
DANVILLEState
VAZip Code
24540-1234FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340857

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 907 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUERRERO, FEDERICO, , ,

Mailing Address 2082 BENTWOOD DRIVE

City
FLORESVILLEState
TXZip Code
78114-6728FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022**Transaction ID : SA17.340714**

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUERRERO, FEDERICO, , ,

Mailing Address 2082 BENTWOOD DRIVE

City
FLORESVILLEState
TXZip Code
78114-6728FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022**Transaction ID : SA17.340715**

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLAState
NYZip Code
11501-3423FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022**Transaction ID : SA17.340721**

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 908 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELD

State
CT

Zip Code
06759-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340733

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City
LAKE PANASOFFKEE

State
FL

Zip Code
33538-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.71

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340866

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMILTON, RANDALL, , ,

Mailing Address 6120 WILDCAT RUN

City
WEST PALM BEACH

State
FL

Zip Code
33412-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

593.53

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340768

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 909 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOGAN, DORIS, , ,

Mailing Address 224 COUNTY ROAD 517

City
HANCEVILLE

State
AL

Zip Code
35077-3836

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.43

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340668

Amount of Each Receipt this Period

12.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUBBART, NANCY, , ,

Mailing Address 3095 KEY HARBOUR DRIVE

City
LAKE SAINT LOUIS

State
MO

Zip Code
63367-2097

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340639

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUBBART, NANCY, , ,

Mailing Address 3095 KEY HARBOUR DRIVE

City
LAKE SAINT LOUIS

State
MO

Zip Code
63367-2097

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

530.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340640

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 910 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUGHINS, HAROLD, , ,

Mailing Address 479 CREIGHTON ROAD

City
FLEMING ISLAND

State
FL

Zip Code
32003-7477

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340781

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340772

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ISDALE, JEANNE, , ,

Mailing Address 1201 WINKLER AVE

City
KILLEEN

State
TX

Zip Code
76542-6108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAMILY OWNED CLINIC

Occupation (for Individual)
BUSINESS MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340748

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

100.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 911 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JACOBS, WARREN, , ,

Mailing Address 7684 CHANTELLE LANE

City
ROSCOEState
ILZip Code
61073-9768FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340820

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JENCKS, JONATHAN, , ,

Mailing Address 17 HIDDEN VALLEY COURT

City
FISHERSVILLEState
VAZip Code
22939-2057FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340897

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, LARRY, , ,

Mailing Address 1985 MOUNT ZION CHURCH ROAD

City
NASHVILLEState
NCZip Code
27856-7666FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ELECTRICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340702

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

285.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 912 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JONES, LARRY, , ,

Mailing Address 401 RAMBLIN LANE

City
ROSEBURGState
ORZip Code
97471-9749FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.90

Date of Receipt

M M	D D	Y Y Y Y
09	07	2022

Transaction ID : SA17.340665

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KEEGER, WIT, , ,

Mailing Address 1191 SHORECREST LANE

City
HUNTINGTON BEACHState
CAZip Code
92648-4162FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M	D D	Y Y Y Y
09	07	2022

Transaction ID : SA17.340667

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M	D D	Y Y Y Y
09	07	2022

Transaction ID : SA17.340763

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 913 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340764

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340766

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANGSTON, JOANE, , ,

Mailing Address 22840 BRANCH COURT

City
TEHACHAPI

State
CA

Zip Code
93561-8200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340673

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 914 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANGSTON, JOANE, , ,

Mailing Address 22840 BRANCH COURT

City
TEHACHAPIState
CAZip Code
93561-8200FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340674

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANGSTON, JOANE, , ,

Mailing Address 22840 BRANCH COURT

City
TEHACHAPIState
CAZip Code
93561-8200FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340675

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANGSTON, JOANE, , ,

Mailing Address 22840 BRANCH COURT

City
TEHACHAPIState
CAZip Code
93561-8200FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340676

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 915 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LANGSTON, JOANE, , ,

Mailing Address 22840 BRANCH COURT

City
TEHACHAPI

State
CA

Zip Code
93561-8200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.50

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340677

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANGSTON, JOANE, , ,

Mailing Address 22840 BRANCH COURT

City
TEHACHAPI

State
CA

Zip Code
93561-8200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.50

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340682

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANIUS, BARBARA, , ,

Mailing Address 12662 HARRIET CIRCLE

City
DALLAS

State
TX

Zip Code
75244-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1151.20

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340812

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

82.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 916 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEE, LOURDRS, , ,

Mailing Address 830 MIMOSA AVE.

City
VISTA

State
CA

Zip Code
92081-8146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340651

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LORENZ, ELLENE, , ,

Mailing Address 12403 169TH AVENUE SOUTHEAST

City
RENTON

State
WA

Zip Code
98059-6501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.18

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340869

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340641

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 917 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENAState
TXZip Code
76655-3038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340642

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENAState
TXZip Code
76655-3038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340643

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENAState
TXZip Code
76655-3038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340644

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 918 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340645

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340646

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340647

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 919 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

MM / DD / YYYY
09 / 07 / 2022

Transaction ID : SA17.340648

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCQUOWN, GARY, , ,

Mailing Address 5677 HUNTERS POINT PIKE

City
LEBANON

State
TN

Zip Code
37087-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

MM / DD / YYYY
09 / 07 / 2022

Transaction ID : SA17.340756

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEDCALF, JACK, , ,

Mailing Address 201 S LEE ST

City
VALLEY VIEW

State
TX

Zip Code
76272-5407

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

MM / DD / YYYY
09 / 07 / 2022

Transaction ID : SA17.340701

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 920 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, ELDEN, , ,

Mailing Address 1533 W LACEY

City
HAYDENState
IDZip Code
83835-8762FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022**Transaction ID : SA17.340749**

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORAN, FRANK, , ,

Mailing Address P.O. BOX 4848

City
SHREVEPORTState
LAZip Code
71134-0848FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022**Transaction ID : SA17.340635**

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MORIARTY, JAMES, , ,

Mailing Address 9056 SYLVANIA METAMORA RD

City
SYLVANIAState
OHZip Code
43560-9427FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

327.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022**Transaction ID : SA17.340750**

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 921 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OLSEN, WILLIAM, , ,

Mailing Address 8796 CEDAR HAMMOCK BLVD

City
NAPLES

State
FL

Zip Code
34112-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340811

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OSTERLOH, RITA, , ,

Mailing Address 2020 ARROWHEAD DRIVE

City
OAKLAND

State
CA

Zip Code
94611-1462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340754

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHENNEGER, SHARON, , ,

Mailing Address 1387 CARTER AVENUE

City
HARPERS FERRY

State
WV

Zip Code
25425-3550

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340832

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 922 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEON

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340719

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAY III, STARLING S, , ,

Mailing Address 22 HICKORY RD.

City
BEAUFORT

State
SC

Zip Code
29907-2204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340775

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COAST

State
FL

Zip Code
32137-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340690

Amount of Each Receipt this Period

2.29

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

67.29

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 923 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COAST

State
FL

Zip Code
32137-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.04

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340747

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANTOSUOSSO, JOSEPH, , ,

Mailing Address 13615 209TH AVE NE

City
WOODINVILLE

State
WA

Zip Code
98077-7600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CASCADE CONSOLIDATED INDUSTRIES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.40

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340818

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEFTON, RICHARD, , ,

Mailing Address 3831 IRONWOOD

City
FORT WAYNE

State
IN

Zip Code
46815-5572

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340793

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 924 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340871

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340878

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2022

Transaction ID : SA17.340882

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 925 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSING

State
ID

Zip Code
83639-5511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340717

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STAMEY, MARLYN, , ,

Mailing Address 6215 SW 35TH WAY

City
GAINESVILLE

State
FL

Zip Code
32608-5242

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340734

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STAMILE, BRUCE, , ,

Mailing Address 1455 SIERRY SPRINGS DR.

City
PRESCOTT

State
AZ

Zip Code
86305-5124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STAMILE HEAVY TRUCK PARTS INC

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.35

Date of Receipt

09 / 07 / 2022

Transaction ID : SA17.340658

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 926 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City
PACEState
FLZip Code
32571-1830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340862

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City
PACEState
FLZip Code
32571-1830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340864

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEWState
CAZip Code
94043-4428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Transaction ID : SA17.340845

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

31.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMAS, MARILYN, , ,

Mailing Address 6859 RALARIC DRIVE

City
DEXTER

State
MI

Zip Code
48130-9689

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340655

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340819

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIRE

State
MI

Zip Code
49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

313.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340703

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 928 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILSON, JEAN, , ,

Mailing Address 5644 ARAL DRIVE

City
LAKELAND

State
FL

Zip Code
33805-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.71

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2022

Transaction ID : SA17.340797

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADELSON, MIRIAM, , ,

Mailing Address 901 TROPHY HILLS DRIVE

City
LAS VEGAS

State
NV

Zip Code
89134-0567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ADELSON DRUG CLINIC

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.340902

Amount of Each Receipt this Period

5000000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENSON, MAYLON, , ,

Mailing Address 2518HWY 82E

City
POULAN

State
GA

Zip Code
31781-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.350437

Amount of Each Receipt this Period

- 35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; CHARGED BACK

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4999967.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 929 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRODIE, STEFAN , , ,

Mailing Address 210 WEST RITTENHOUSE SQ.

City
PHILADELPHIAState
PAZip Code
19103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BRODIE GENERATIONAL CAPITAL PARTNERS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.340901

Amount of Each Receipt this Period

1000000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.340903

Amount of Each Receipt this Period

1428.16

☒ Memo Item
CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEADLE, RALPH, , ,

Mailing Address P.O. BOX 53658

City
LUBBOCKState
TXZip Code
79453-3658FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

611.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341164

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1000010.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 930 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEADLE, RALPH, , ,

Mailing Address P.O. BOX 53658

City
LUBBOCK

State
TX

Zip Code
79453-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341166

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEADLE, RALPH, , ,

Mailing Address P.O. BOX 53658

City
LUBBOCK

State
TX

Zip Code
79453-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341167

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLANKENSHIP, KATHY, , ,

Mailing Address 125 ORCHARD DR.

City
ELIDA

State
OH

Zip Code
45807-1084

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341623

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 931 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341279

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341428

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341574

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 932 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRADEN, ANNETTE, , ,

Mailing Address 10710 MIRASOL DRIVE. BLDG.701

City
MIROMAR LAKESState
FLZip Code
33913-7842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341618

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, JOHN, , ,

Mailing Address 3643 KITELY AVE.

City
BOYNTON BEACHState
FLZip Code
33436-3117FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341218

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASEMENT, SANDRA, , ,

Mailing Address 28356 ALAVA

City
MISSION VIEJOState
CAZip Code
92692-1634FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

248.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341150

Amount of Each Receipt this Period

0.12

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 933 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341220

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341004

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341005

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 934 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341007

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341008

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341010

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 935 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341011

Amount of Each Receipt this Period

0.22

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341495

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341496

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

20.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 936 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341497

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CORY, JAY, , ,

Mailing Address 435 WILLOW VISTA DRIVE

City
EL LAGO

State
TX

Zip Code
77586-6019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341541

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DONAHUE, NANCY, , ,

Mailing Address 10139 KRESS ROAD

City
PINCKNEY

State
MI

Zip Code
48169-9373

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341000

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 937 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELLIOTT, JODI, , ,

Mailing Address P.O.BOX 756

City
ORLANDState
CAZip Code
95963-0756FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.70

Date of Receipt

M M	D D	Y Y Y Y
09	08	2022

Transaction ID : SA17.341141

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTONState
SCZip Code
29401-1489FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.10

Date of Receipt

M M	D D	Y Y Y Y
09	08	2022

Transaction ID : SA17.341474

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTONState
SCZip Code
29401-1489FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

678.10

Date of Receipt

M M	D D	Y Y Y Y
09	08	2022

Transaction ID : SA17.341475

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

9.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 938 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTON

State
SC

Zip Code
29401-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.10

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341476

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTON

State
SC

Zip Code
29401-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.10

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341477

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

823.84

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341017

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 939 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341018

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341019

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341021

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

6.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 940 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2022

Transaction ID : SA17.341025

Amount of Each Receipt this Period

0.06

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEEState
WIZip Code
54455-9035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2022

Transaction ID : SA17.341036

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGAState
CAZip Code
91730-1916FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2022

Transaction ID : SA17.341071

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 941 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341072

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341073

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.60

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341074

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 942 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILLOCK, GAIL, , ,

Mailing Address 2518 E 66TH PL

City
TULSAState
OKZip Code
74136-1209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GAIL GILLOCKOccupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.340950

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILLOCK, GAIL, , ,

Mailing Address 2518 E 66TH PL

City
TULSAState
OKZip Code
74136-1209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GAIL GILLOCKOccupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.340951

Amount of Each Receipt this Period

0.30

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAHNEMANN, ARTUR, , ,

Mailing Address 4510 140 AVE SE

City
BELLEVUEState
WAZip Code
98006-2343FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

381.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341170

Amount of Each Receipt this Period

0.13

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 943 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAHNEMANN, ARTUR, , ,

Mailing Address 4510 140 AVE SE

City
BELLEVUEState
WAZip Code
98006-2343FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.26

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341171

Amount of Each Receipt this Period

0.13

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITYState
OKZip Code
73139-2623FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341100

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALL, SHARON, , ,

Mailing Address 9 CLARK ROAD

City
LITCHFIELDState
CTZip Code
06759-2809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341372

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 944 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOFFMAN, JEFFREY, , ,

Mailing Address 318 NOEL DRIVE

City
MONROEVILLE

State
PA

Zip Code
15146-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.43

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341235

Amount of Each Receipt this Period

0.43

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUTCHINSON, CRAIG, , ,

Mailing Address 327 TORREY PINES POINT

City
NAPLES

State
FL

Zip Code
34113-7543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISION LANDSCAPE

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2261.37

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341572

Amount of Each Receipt this Period

0.16

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JACOBS, WARREN, , ,

Mailing Address 7684 CHANTELE LANE

City
ROSCOE

State
IL

Zip Code
61073-9768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.07

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341062

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 945 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JAMES, GLORIA, , ,

Mailing Address 4673 PIERSON DRIVE

City
OOLTEWAHState
TNZip Code
37363-8881FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.340974

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, LENORA, , ,

Mailing Address 5510 WINDSOR ISLAND RD N UNIT #16

City
KEIZERState
ORZip Code
97303-6152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOME INSTEAD SENIOR CAREOccupation (for Individual)
CAREGIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341261

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODYState
WYZip Code
82414-8023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341038

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 946 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341045

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIRBY, KATHY, , ,

Mailing Address 412 WENNINGTON PL

City
GREER

State
SC

Zip Code
29651-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.70

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341518

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LACKEY, ANN, , ,

Mailing Address 1117 SPRUCE ST

City
LAKE OSWEGO

State
OR

Zip Code
97034-6153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.91

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341404

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 947 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAND, NANCY, , ,

Mailing Address 34 COPENHAGEN AVE

City
PUNTA GORDAState
FLZip Code
33950-7316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341244

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOGAN, VICKY, , ,

Mailing Address 729 WESTERLY DR.

City
BRANDONState
MSZip Code
39042-9547FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341472

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASTROIANNI, SILVIO, , ,

Mailing Address 100 CRESCENT AVENUE

City
CLIFFSIDE PARKState
NJZip Code
07010-3046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341345

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.85

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 948 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCURRYNEFF, GENEVA, , ,

Mailing Address 390 HARRIS ROAD

City
FAYETTEVILLEState
GAZip Code
30215-2732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341269

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCURRYNEFF, GENEVA, , ,

Mailing Address 390 HARRIS ROAD

City
FAYETTEVILLEState
GAZip Code
30215-2732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341270

Amount of Each Receipt this Period

23.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCURRYNEFF, GENEVA, , ,

Mailing Address 390 HARRIS ROAD

City
FAYETTEVILLEState
GAZip Code
30215-2732FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341271

Amount of Each Receipt this Period

0.47

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

33.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 949 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCURRYNEFF, GENEVA, , ,

Mailing Address 390 HARRIS ROAD

City
FAYETTEVILLE

State
GA

Zip Code
30215-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.44

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341272

Amount of Each Receipt this Period

0.47

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCSHEA, RITA, , ,

Mailing Address 18 COUNTRY BLUFF COURT

City
SAINT CHARLES

State
MO

Zip Code
63301-3734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.40

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341106

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

223.52

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341374

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 950 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341376

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341377

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

223.52

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341410

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341412

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341413

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NIEMEYER, GREG, , ,

Mailing Address 7908 STANFORD

City
DALLAS

State
TX

Zip Code
75225-8210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE-HARALSON

Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.75

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341240

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 952 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NORTON, JAMES, , ,

Mailing Address 504 32ND AVE

City
LONGVIEWState
WAZip Code
98632-1714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FOSTER FARMSOccupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341467

Amount of Each Receipt this Period

65.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NORTON, JAMES, , ,

Mailing Address 504 32ND AVE

City
LONGVIEWState
WAZip Code
98632-1714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FOSTER FARMSOccupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341468

Amount of Each Receipt this Period

2.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NOWAK, DANNY, , ,

Mailing Address 715 GLENWOOD AVENUE

City
JACKSONState
MIZip Code
49203-2938FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

213.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341079

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

72.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 953 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NOWAK, DANNY, , ,

Mailing Address 715 GLENWOOD AVENUE

City
JACKSON

State
MI

Zip Code
49203-2938

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.35

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341080

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ORR, CHUCK, , ,

Mailing Address 415 S SPAULDING AVE

City
PUEBLO

State
CO

Zip Code
81007-2899

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.75

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.340965

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OSTER, MARLENE, , ,

Mailing Address 2859 DAISYBROOK ST NW

City
NORTH CANTON

State
OH

Zip Code
44720-8168

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OSTER ENTERPRISES

Occupation (for Individual)
OFFICE MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

241.02

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341416

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 954 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PARRISH, BUTCH, , ,

Mailing Address 1715 BEACH RD

City
HAMPTON

State
VA

Zip Code
23664-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.91

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.340956

Amount of Each Receipt this Period

0.40

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POZZI, ROBERT, , ,

Mailing Address 3733 FALSTONE ROAD

City
NORTH CHESTERFIELD

State
VA

Zip Code
23234-3769

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.30

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.340970

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATER

State
FL

Zip Code
33764-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

512.85

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341431

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.25

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 955 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROOM, HERBERT, , ,

Mailing Address PRO BOX 601

City
DALLESFORTState
WAZip Code
98617-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341129

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSS, ERROL, , ,

Mailing Address 265 CONKLIN ST

City
FARMINGDALEState
NYZip Code
11735-2661FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARDSCRABBLEOccupation (for Individual)
BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.340916

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSS, ERROL, , ,

Mailing Address 265 CONKLIN ST

City
FARMINGDALEState
NYZip Code
11735-2661FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARDSCRABBLEOccupation (for Individual)
BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

378.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.340918

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 956 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWAB, ROBERT, , ,

Mailing Address 5123 E CALLE DEL NORTE

City
PHOENIXState
AZZip Code
85018-4427FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.340936

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, GARLAND, , ,

Mailing Address 585 FOXDALE LOOP W

City
SOUTHAVENState
MSZip Code
38672-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341612

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, GARLAND, , ,

Mailing Address 585 FOXDALE LOOP W

City
SOUTHAVENState
MSZip Code
38672-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

291.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341613

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 957 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, KENNETH, , ,

Mailing Address 9225 EAST TANQUE VERDE ROAD, APT 4

City
TUCSONState
AZZip Code
85749-7796FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.33

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341161

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOWState
VAZip Code
20136-2532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341328

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341504

Amount of Each Receipt this Period

0.08

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City
PACE

State
FL

Zip Code
32571-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341503

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TYLER, ERNEST, , ,

Mailing Address 23432 NIGHTSKY RD

City
RAMONA

State
CA

Zip Code
92065-5924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341162

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TYLER, ERNEST, , ,

Mailing Address 23432 NIGHTSKY RD

City
RAMONA

State
CA

Zip Code
92065-5924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341163

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341552

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341555

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEHMAN, JOAN, , ,

Mailing Address 831 HICKORY KNOB CIRCLE

City
CEDAR HILL

State
TX

Zip Code
75104-7803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.340982

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 960 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEHMAN, JOAN, , ,

Mailing Address 831 HICKORY KNOB CIRCLE

City
CEDAR HILL

State
TX

Zip Code
75104-7803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.340984

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, JEAN, , ,

Mailing Address 5644 ARAL DRIVE

City
LAKELAND

State
FL

Zip Code
33805-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.71

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341442

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YANEZ, OLGA, , ,

Mailing Address 9655 CAMERON ST

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

368.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341560

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.01

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YANEZ, OLGA, , ,

Mailing Address 9655 CAMERON ST

City
RANCHO CUCAMONGAState
CAZip Code
91730-5624FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.90

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341566

Amount of Each Receipt this Period

0.15

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341658

Amount of Each Receipt this Period

4379.30

☒ Memo Item
 CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARMAS, ROMULO, , ,

Mailing Address 1776 72AVE NE

City
SAINT PETERSBURGState
FLZip Code
33702-4712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

Transaction ID : SA17.341692

Amount of Each Receipt this Period

75.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.15

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRADEN, ANNETTE, , ,

Mailing Address 10710 MIRASOL DRIVE. BLDG.701

City
MIROMAR LAKESState
FLZip Code
33913-7842FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341744

Amount of Each Receipt this Period

45.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BROWN, EARL M, , ,

Mailing Address 8928 WEST OAK LANE

City
LAKE CITYState
MIZip Code
49651-8042FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341777

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BUCHANAN, JOHN, , ,

Mailing Address 4642 BLUFF AVE

City
JACKSONVILLEState
FLZip Code
32225-1410FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

507.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341662

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 963 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BUTCHER, VERNON, , ,

Mailing Address 6401 OREFIELD ROAD

City
SPRING GROVEState
PAZip Code
17362-8959FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341701

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CALLAWAY, DAVE, , ,

Mailing Address 28692 W. US. HWY 69

City
BETHANYState
MOZip Code
64424-7125FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
STORM RECOVERY. FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341694

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARLTON, RACHAEL, , ,

Mailing Address 8761 STATE RD 78W LOT 50

City
OKEECHOBEEState
FLZip Code
34974-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1146.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341748

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

140.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARRESCIA, ROBERT, , ,

Mailing Address 9515 W. WHITTINGHAM POINT

City
MAPLETON

State
IL

Zip Code
61547-9329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341672

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONNOLLY, THOMAS D, , ,

Mailing Address 203 CALABAY PARC BLVD

City
DAVENPORT

State
FL

Zip Code
33897-9518

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.30

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341761

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DICESARE, DOMINIC, , ,

Mailing Address 1279 COUNTRY LANE

City
WEST CHESTER

State
PA

Zip Code
19380-1233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341791

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 965 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTE

State
CA

Zip Code
92673-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 08 / 2022

Transaction ID : SA17.341742

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DRUMM, BURT, , ,

Mailing Address 1088 MEADOW BROOK DRIVE

City
WOODSTOCK

State
GA

Zip Code
30188-6564

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 08 / 2022

Transaction ID : SA17.341763

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 08 / 2022

Transaction ID : SA17.341733

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

54.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 966 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341734

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341736

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FENDLASON, JOAN, , ,

Mailing Address 4833 SAINT LOUIS STREET

City
ZACHARY

State
LA

Zip Code
70791-3466

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341782

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 967 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTON

State
SC

Zip Code
29401-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.10

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341774

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOLIN, NILE, , ,

Mailing Address 171 ANTELOPE AVENUE

City
PAGOSA SPRINGS

State
CO

Zip Code
81147-0556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341703

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRECO, JOAN, , ,

Mailing Address 65-1230 HAWAII BELT ROAD

City
KAMUELA

State
HI

Zip Code
96743-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341772

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 968 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMZA, ADAM, , ,

Mailing Address 3802 GARDENDALE DRIVE

City
HOUSTON

State
TX

Zip Code
77092-7921

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SPIREON

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341776

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEIN, BARBARA, , ,

Mailing Address 3129 TABLELANDS COURT #1F

City
PRESCOTT

State
AZ

Zip Code
86301-4600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341783

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LABER, JAMES, , ,

Mailing Address 1235 S MAPLE CT

City
VISALIA

State
CA

Zip Code
93292-5255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IDEA PRINTING GRAPHICS INC

Occupation (for Individual)
PRESIDENT/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341808

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 969 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTOState
CAZip Code
95864-1768FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341813

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAEGERLEIN, NANCEY, , ,

Mailing Address 52 KERN STREET

City
WILLIAMSState
INZip Code
47470-9085FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341743

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENAState
TXZip Code
76655-3038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341793

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

95.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 970 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341794

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341795

Amount of Each Receipt this Period

17.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341796

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 971 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341797

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341798

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341799

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 972 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341801

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341802

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENA

State
TX

Zip Code
76655-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341803

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 973 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANCUSO, CINDY, , ,

Mailing Address 13064 CHAPEL ROAD

City
LORENAState
TXZip Code
76655-3038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341804

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCBRIDE, JAMES, , ,

Mailing Address 58 HIGH RIDGE ROAD

City
NORWAYState
MEZip Code
04268-4882FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341770

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEYERS, DANIEL, , ,

Mailing Address 25 ROCKYLEDGE ROAD

City
SWAMPSCOTTState
MAZip Code
01907-2821FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COGNITION FINANCIAL CORPOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341723

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOSS, PATRICIA, , ,

Mailing Address 2665 WHISPERING PINE

City
TWIN FALLS

State
ID

Zip Code
83301-8939

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341722

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NAPIER, PATSY, , ,

Mailing Address 1353 W CABOOSE CT

City
POST FALLS

State
ID

Zip Code
83854-7462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341669

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OXFORD, LARRY B, , ,

Mailing Address 18211 BULVERDE RD #8307

City
SAN ANTONIO

State
TX

Zip Code
78259-3716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALAMO HEIGHTS ISD

Occupation (for Individual)
TENNIS CENTER DIRECTOR AND TEI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341691

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 975 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PRESTON, BRADLEY, , ,

Mailing Address 2109 SOMMER STREET

City
NAPAState
CAZip Code
94559-4306FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341699

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAUB, THOMAS, , ,

Mailing Address 525 NORTH GILBERT STREET

City
ANAHEIMState
CAZip Code
92801-5034FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOBIFARM LPOccupation (for Individual)
ASSISTANCE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341670

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SALVADORI, MARY, , ,

Mailing Address 1403 STRATFIELD CIRCLE NE

City
BROOKHAVENState
GAZip Code
30319-2522FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2022

Transaction ID : SA17.341775

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

50.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341771

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STELLABOTT, ROBERT, , ,

Mailing Address 2405 BLUFFTON CT.

City
LAS VEGAS

State
NV

Zip Code
89134-7234

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.05

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341764

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341727

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 977 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACH

State
CA

Zip Code
92660-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341728

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TORRES, KRISTINE, , ,

Mailing Address 2734 BENRUS BOULEVARD

City
SAN ANTONIO

State
TX

Zip Code
78228-2319

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QLARANT

Occupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341747

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTIN

State
TX

Zip Code
78731-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

786.75

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341696

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 978 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTIN

State
TX

Zip Code
78731-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341697

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRUDEL, PATRICIA, , ,

Mailing Address 4303 NE BIRDHAVEN

City
NEWBERG

State
OR

Zip Code
97132-6993

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.05

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341729

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRUDEL, PATRICIA, , ,

Mailing Address 4303 NE BIRDHAVEN

City
NEWBERG

State
OR

Zip Code
97132-6993

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

581.05

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341730

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 979 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRUDEL, PATRICIA, , ,

Mailing Address 4303 NE BIRDAVEN

City
NEWBERG

State
OR

Zip Code
97132-6993

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.05

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341735

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341792

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. UECKERT, SUSAN, , ,

Mailing Address 7908 NORTH 281ST AVENUE

City
VALLEY

State
NE

Zip Code
68064-8027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISA

Occupation (for Individual)
SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

09 / 08 / 2022

Transaction ID : SA17.341750

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 980 OF 1424
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WADKINS, SHIRLEY, , ,

Mailing Address 3005 NORTHAVEN STREET

City
CORINTH

State
MS

Zip Code
38834-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341695

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WATSON, STEPHEN, , ,

Mailing Address 9243 BARRINGTON CR.

City
MISSOURI CITY

State
TX

Zip Code
77459-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341674

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHINERY, JOHN, , ,

Mailing Address 759 GAYRON DRIVE

City
FAYETTEVILLE

State
NC

Zip Code
28311-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
US MILITARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA17.341780

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 981 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLINGS, WILLIAM, , ,

Mailing Address 90097 SPIRES LANE EUGENE

City
EUGENE

State
OR

Zip Code
97402-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341719

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YEOMAN, DAVID, , ,

Mailing Address 355 MCQUEEN ROAD

City
WHITEVILLE

State
NC

Zip Code
28472-5157

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.10

Date of Receipt

09 / **08** / **2022**

Transaction ID : SA17.341812

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOUEST, GARY, , ,

Mailing Address P.O. BOX 310

City
GALLIANO

State
LA

Zip Code
70354-0310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDISON CHOUEST OFFSHORE

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

09 / **09** / **2022**

Transaction ID : SA17.341815

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100055.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 982 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KOCH INDUSTRIES, INC.

Mailing Address 4111 EAST 37TH ST NORTH

City
WICHITA

State
KS

Zip Code
67220-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.341817

Amount of Each Receipt this Period

250000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MELALEUCA

Mailing Address 4609 WEST 65TH STREET SOUTH

City

IDAHO FALLS

State

ID

Zip Code

83402-5742

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1770000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.341818

Amount of Each Receipt this Period

880000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.341819

Amount of Each Receipt this Period

1325.35

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1130000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 983 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLEState
TXZip Code
76034-7202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342229

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLEState
TXZip Code
76034-7202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342243

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLEState
TXZip Code
76034-7202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342245

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 984 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLE

State
TX

Zip Code
76034-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342246

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLE

State
TX

Zip Code
76034-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342247

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLE

State
TX

Zip Code
76034-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342249

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

10.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 985 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, CHRIS, , ,

Mailing Address 116 PARK AVE

City
CUMBERLANDState
MDZip Code
21502-7100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342536

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAKER, RUDY, , ,

Mailing Address 1016 SWIFT CREEK DRIVE

City
CLAYTONState
NCZip Code
27520-9737FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341839

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342456

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.55

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 986 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342495

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342496

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342497

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 987 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342498

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARELAS, HORTENCIA, , ,

Mailing Address 11915 HILLCROFT AVE

City
HOUSTONState
TXZip Code
77035-4222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342499

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BERSAGLIERI, RONALD, , ,

Mailing Address 6783 CHELTON DRIVE

City
OAKLANDState
CAZip Code
94611-1619FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

251.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342382

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.45

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 988 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEST, SAMMY, , ,

Mailing Address 1807FM 3240

City
BANDERA

State
TX

Zip Code
78003-5233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342175

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BLANKENSHIP, KATHY, , ,

Mailing Address 125 ORCHARD DR.

City
ELIDA

State
OH

Zip Code
45807-1084

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342531

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342191

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 989 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEWState
DEZip Code
19970-4524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341841

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEWState
DEZip Code
19970-4524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341846

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMANState
SCZip Code
29349-5600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342122

Amount of Each Receipt this Period

0.10

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.80

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAMBERLIN, RICHARD, , ,

Mailing Address 81 LYNN AVENUE

City
HULL

State
MA

Zip Code
02045-2217

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.20

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342357

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAMBERLIN, RICHARD, , ,

Mailing Address 81 LYNN AVENUE

City
HULL

State
MA

Zip Code
02045-2217

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.20

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342358

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342440

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 991 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342444

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342445

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342446

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 992 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342447

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342448

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COX, BARBARA COX, , ,

Mailing Address 3328 TUCKALEECHEE PIKE,

City
MARYVILLE

State
TN

Zip Code
37803-7913

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

222.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.341829

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 993 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COX, BARBARA COX, , ,

Mailing Address 3328 TUCKALEECHEE PIKE,

City
MARYVILLEState
TNZip Code
37803-7913FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.341830

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTEState
CAZip Code
92673-6843FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342546

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ECHOLS, DON, , ,

Mailing Address 3461 JERROLD BOULEVARD

City
BRUNSWICKState
OHZip Code
44212-2225FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342380

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 994 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGEState
NJZip Code
08514-2515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342363

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342171

Amount of Each Receipt this Period

0.33

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342172

Amount of Each Receipt this Period

0.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.09

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 995 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342173

Amount of Each Receipt this Period

3.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342174

Amount of Each Receipt this Period

3.33

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342176

Amount of Each Receipt this Period

0.22

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 996 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ENGLE, NANCY, , ,

Mailing Address 4240 PRESCOTT AVE, 4B

City
DALLASState
TXZip Code
75219-2377FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.35

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342134

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City

RANCHO CUCAMONGA

State

CA

Zip Code

91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341948

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City

RANCHO CUCAMONGA

State

CA

Zip Code

91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341950

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 997 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGAState
CAZip Code
91730-1916FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341951

Amount of Each Receipt this Period

0.10

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGAState
CAZip Code
91730-1916FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341952

Amount of Each Receipt this Period

0.10

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGAState
CAZip Code
91730-1916FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342271

Amount of Each Receipt this Period

4.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

4.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 998 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342272

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342273

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342274

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

18.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 999 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342275

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342543

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMILTON, CONNIE J, , ,

Mailing Address 5923 NE MOONSTONE DR.

City
LEES SUMMIT

State
MO

Zip Code
64064-1190

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

920.45

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342437

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1000 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JAHN, TERESA, , ,

Mailing Address 13467 SUMPTER STAGE HWY

City
BAKER CITY

State
OR

Zip Code
97814-7909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342449

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342457

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELSEY, T D, , ,

Mailing Address 22 SLIDE MTN LANE

City
CODY

State
WY

Zip Code
82414-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

388.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342458

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1001 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEETUN, JEFFREY, , ,

Mailing Address 1325 GRASSLANDS BLVD, , , ,

City
LAKELAND

State
FL

Zip Code
33803-5405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342189

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MANGOLD, MARIE, , ,

Mailing Address 5101 239TH PL SW

City
MOUNTLAKE TERRACE

State
WA

Zip Code
98043-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.90

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.341918

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANGOLD, MARIE, , ,

Mailing Address 5101 239TH PL SW

City
MOUNTLAKE TERRACE

State
WA

Zip Code
98043-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.90

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.341919

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.60

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1002 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MANGOLD, MARIE, , ,

Mailing Address 5101 239TH PL SW

City
MOUNTLAKE TERRACEState
WAZip Code
98043-5624FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.90

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341921

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARTINEZ, BLANCA, , ,

Mailing Address 1955 PRINCETON CT

City
SALINASState
CAZip Code
93906-5106FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.35

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342287

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City
THE VILLAGESState
FLZip Code
32162-2208FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342489

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1003 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City
THE VILLAGES

State
FL

Zip Code
32162-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342491

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City
THE VILLAGES

State
FL

Zip Code
32162-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342492

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City
THE VILLAGES

State
FL

Zip Code
32162-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342493

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1004 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOBLEY, TYMA, , ,

Mailing Address 23917 PEDERNALES DRIVE

City
SPICEWOODState
TXZip Code
78669-1491FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
R.N. NICU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.75

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342450

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342205

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTONState
TXZip Code
77056-2422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342207

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1005 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOLL, BETTY, , ,

Mailing Address 5120 LONGMONT DRIVE UNIT 5

City
HOUSTON

State
TX

Zip Code
77056-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342211

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NAUGLE, MARVIN, , ,

Mailing Address 737 BRANDON CIR

City
LEBANON

State
MO

Zip Code
65536-5123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1113.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.341861

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICHOLSON, SANDRA, , ,

Mailing Address 7 CLARKS LANE

City
NIANTIC

State
CT

Zip Code
06357-1533

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342534

Amount of Each Receipt this Period

0.38

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1006 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEMEYER, GREG, , ,

Mailing Address 7908 STANFORD

City
DALLASState
TXZip Code
75225-8210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE-HARALSONOccupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.75

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342376

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OWENS, MARSHA ANN, , ,

Mailing Address 17807 WOOD BARK ROAD

City
SPRINGState
TXZip Code
77379-6120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.25

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341956

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OWENS, MARSHA ANN, , ,

Mailing Address 17807 WOOD BARK ROAD

City
SPRINGState
TXZip Code
77379-6120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

283.25

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341957

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1007 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATERState
FLZip Code
33764-3724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341986

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REULMAN, CHRISTOPHER, , ,

Mailing Address 2259 HABERSHAM DRIVE

City
CLEARWATERState
FLZip Code
33764-3724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342153

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COASTState
FLZip Code
32137-2702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342352

Amount of Each Receipt this Period

0.02

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.67

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1008 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHILLING, DIANA, , ,

Mailing Address 19 AZALEA DR.

City
KEY WESTState
FLZip Code
33040-6206FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.10

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341868

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOWState
VAZip Code
20136-2532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342462

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TASSIN, JANE, , ,

Mailing Address 2222 WOODLAND DR.

City
OPELOUSASState
LAZip Code
70570-3812FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.95

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341820

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1009 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TASSIN, JANE, , ,

Mailing Address 2222 WOODLAND DR.

City
OPELOUSASState
LAZip Code
70570-3812FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.341821

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TASSIN, JANE, , ,

Mailing Address 2222 WOODLAND DR.

City
OPELOUSASState
LAZip Code
70570-3812FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.341823

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.341835

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

26.75

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1010 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341836

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341837

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALICKE, PATRICIA, , ,

Mailing Address 33 EAGLE LANE

City
SEDONAState
AZZip Code
86336-7114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341997

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1011 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341928

Amount of Each Receipt this Period

5.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341931

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341933

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1012 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341934

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341935

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.341936

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1013 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLEState
CAZip Code
92392-5560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341938

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWNState
NJZip Code
08057-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341907

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWNState
NJZip Code
08057-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341908

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1014 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWNState
NJZip Code
08057-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.341909

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOODS, MICHAEL, , ,

Mailing Address 5121 N VIA CONDESA

City
TUCSONState
AZZip Code
85718-5713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

851.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342203

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOODS, MICHAEL, , ,

Mailing Address 5121 N VIA CONDESA

City
TUCSONState
AZZip Code
85718-5713FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

851.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342204

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.20

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 1015 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City
GRANDVILLEState
MIZip Code
49418-2259FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342434

Amount of Each Receipt this Period

0.05

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342565

Amount of Each Receipt this Period

7015.13

☒ Memo Item
 CONTRIBUTION
NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDEState
ILZip Code
60162-2203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

249.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342764

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1016 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLE

State
TX

Zip Code
76034-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342617

Amount of Each Receipt this Period

18.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BASTOUNES, ATHANASIA CINDY, , ,

Mailing Address 1005 BUTTERNUT LANE

City
MOUNT PROSPECT

State
IL

Zip Code
60056-6357

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MIGHTY CAKE COMPANY

Occupation (for Individual)
BAKERY SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.35

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342651

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BASTOUNES, ATHANASIA CINDY, , ,

Mailing Address 1005 BUTTERNUT LANE

City
MOUNT PROSPECT

State
IL

Zip Code
60056-6357

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MIGHTY CAKE COMPANY

Occupation (for Individual)
BAKERY SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.35

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342652

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1017 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEAN, KENNETH, , ,

Mailing Address 950 BROADWAY

City
BANGORState
PAZip Code
18013-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342836

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCHP

City
SIERRA VISTAState
AZZip Code
85635-5065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342777

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEHNKE, DOUGLAS, , ,

Mailing Address 1420 CAMINO RANCHP

City
SIERRA VISTAState
AZZip Code
85635-5065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1918.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342778

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1018 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BELDEN, BETHANY, , ,

Mailing Address P.O. BOX 1795

City
ALPINE

State
TX

Zip Code
79831-1795

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342680

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342759

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342829

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1019 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342830

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BROWN, CAROL, , ,

Mailing Address 94-909 KAAHOLO STREET

City
WAIPAHU

State
HI

Zip Code
96797-4523

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342603

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, MARIE, , ,

Mailing Address 11431 RUBY CANYON LANE

City
HOUSTON

State
TX

Zip Code
77095-4863

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342785

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1020 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTON

State
TX

Zip Code
77079-3182

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342634

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUERGER, LELIA T, , ,

Mailing Address 14242 MISTY MEADOW LANE

City
HOUSTON

State
TX

Zip Code
77079-3182

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342643

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURGESS, BARBARA, , ,

Mailing Address 3177 CHERRY MEADOW PATH

City
LEXINGTON

State
KY

Zip Code
40509-8547

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342747

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1021 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAMPBELL, CHARLES, , ,

Mailing Address 5540 SARATOGA BOULEVARD

City

CORPUS CHRISTI

State

TX

Zip Code

78413-2953

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342620

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPBELL, CHARLES, , ,

Mailing Address 5540 SARATOGA BOULEVARD

City

CORPUS CHRISTI

State

TX

Zip Code

78413-2953

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342621

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAMPBELL, CHARLES, , ,

Mailing Address 5540 SARATOGA BOULEVARD

City

CORPUS CHRISTI

State

TX

Zip Code

78413-2953

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342622

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1060.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1022 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARKE, DWIGHT, , ,

Mailing Address 9400 W LYLE ST

City
BOISE

State
ID

Zip Code
83709-4847

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.75

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342586

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CORY, JAY, , ,

Mailing Address 435 WILLOW VISTA DRIVE

City
EL LAGO

State
TX

Zip Code
77586-6019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.12

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342579

Amount of Each Receipt this Period

9.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIAZLLANEZA, JOSE ANTONIO, , ,

Mailing Address 393 COVE CREEK LOOP

City
MOORESVILLE

State
NC

Zip Code
28117-8935

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

533.75

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342765

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

46.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1023 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIAZLLANEZA, JOSE ANTONIO, , ,

Mailing Address 393 COVE CREEK LOOP

City
MOORESVILLEState
NCZip Code
28117-8935FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.75

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342767

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DORMAIER, SHERRIL, , ,

Mailing Address 7007NWISCOMB ST #508

City
SPOKANEState
WAZip Code
99208-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1486.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342805

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DORMAIER, SHERRIL, , ,

Mailing Address 7007NWISCOMB ST #508

City
SPOKANEState
WAZip Code
99208-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1486.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342809

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

82.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 1024 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DORMAIER, SHERRIL, , ,

Mailing Address 7007NWISCOMB ST #508

City
SPOKANEState
WAZip Code
99208-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1486.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342811

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ECHOLS, DON, , ,

Mailing Address 3461 JERROLD BOULEVARD

City
BRUNSWICKState
OHZip Code
44212-2225FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342792

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELDRIDGE, WARD, , ,

Mailing Address 37 LOVEMAN RD

City
CREAM RIDGEState
NJZip Code
08514-2515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

447.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342569

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342760

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342761

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342762

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUART

State
FL

Zip Code
34996-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSI

Occupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342763

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ENGLE, NANCY, , ,

Mailing Address 4240 PRESCOTT AVE, 4B

City
DALLAS

State
TX

Zip Code
75219-2377

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342716

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ENGLISH, JANET, , ,

Mailing Address 929 ROLLING WOODS LANE

City
LAKELAND

State
FL

Zip Code
33813-1249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342636

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 1027 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ENGLISH, JANET, , ,

Mailing Address 929 ROLLING WOODS LANE

City
LAKELANDState
FLZip Code
33813-1249FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342637

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRITSCH, ANNETTE, , ,

Mailing Address 2024 MEADOW CREEK CIRCLE SOUTHEAST

City
OWENS CROSS ROADSState
ALZip Code
35763-8883FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342601

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORDON, RON, , ,

Mailing Address 913 ANTLER MEADOW WAY

City
FUQUAY VARINAState
NCZip Code
27526-4849FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

286.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342818

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1028 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342814

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342815

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONT

State
IL

Zip Code
61568-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342692

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1029 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEUSSER, SYDNEY, , ,

Mailing Address P. I. BOX1658

City
DAWSONVILLEState
GAZip Code
30534-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342786

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOGAN, DORIS, , ,

Mailing Address 224 COUNTY ROAD 517

City
HANCEVILLEState
ALZip Code
35077-3836FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342838

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JERNIGAN, PEGGY, , ,

Mailing Address 311 S KINGFFISHER LN

City
HAMPSTEADState
NCZip Code
28443-7963FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342780

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

57.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1030 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JERNIGAN, PEGGY, , ,

Mailing Address 311 S KINGFFISHER LN

City
HAMPSTEADState
NCZip Code
28443-7963FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342781

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, REED, , ,

Mailing Address 460 S 2ND E

City
SODA SPRINGSState
IDZip Code
83276-1671FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342615

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, REED, , ,

Mailing Address 460 S 2ND E

City
SODA SPRINGSState
IDZip Code
83276-1671FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

451.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342616

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

42.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1031 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KEINATH, WARREN C., , ,

Mailing Address 24 RAVENS POINTE DR.

City
LAKE SAINT LOUIS

State
MO

Zip Code
63367-2238

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2268.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342660

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAZZARI, PAT, , ,

Mailing Address 1816 EASTERN AVE

City
SACRAMENTO

State
CA

Zip Code
95864-1768

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342609

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, GREGORY, , ,

Mailing Address 312 W COMSTOCK ST

City
SEATTLE

State
WA

Zip Code
98119-3522

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342669

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1032 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAGNUSSON, MELINDA, , ,

Mailing Address P.O. BOX 158

City
LA VERNEState
CAZip Code
91750-0158FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342587

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTINState
TXZip Code
78752-4123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342575

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCLAIN, JUANITA, , ,

Mailing Address 2196 N W ANDREA ST

City
ROSEBURGState
ORZip Code
97471-1714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.10

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342580

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

92.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1033 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCLAIN, JUANITA, , ,

Mailing Address 2196 N W ANDREA ST

City
ROSEBURGState
ORZip Code
97471-1714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342581

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCLAIN, JUANITA, , ,

Mailing Address 2196 N W ANDREA ST

City
ROSEBURGState
ORZip Code
97471-1714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342606

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCORMACK, BETSY, , ,

Mailing Address 722 EAGLE POINT DRIVE

City
VENICEState
FLZip Code
34285-6022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

477.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342574

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

125.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1034 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342696

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MONTGOMERY, ALLAN, , ,

Mailing Address 7047 FREEMANS RD

City
WAKEFIELD

State
VA

Zip Code
23888-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342854

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ORR, CHUCK, , ,

Mailing Address 415 S SPAULDING AVE

City
PUEBLO

State
CO

Zip Code
81007-2899

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

505.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342633

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

330.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1035 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PEEPLES, TERRY, , ,

Mailing Address 9 ALLEN DR.

City
FLEMING

State
OH

Zip Code
45729-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.40

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342819

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERRIN, ANNE, , ,

Mailing Address 49748 COUNTY RD. B

City
CENTER

State
CO

Zip Code
81125-9701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342681

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHILLIPS, RICHARD, , ,

Mailing Address 1906 EAST MAIN

City
MEDFORD

State
OR

Zip Code
97504-7619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342825

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1036 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PUGLIESE, DAVID, , ,

Mailing Address 152 FLOWER HILL

City
KINGSTON

State
NY

Zip Code
12401-8250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342682

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAULERSON, ELBERTA, , ,

Mailing Address 9664WOODROWRAULERSONROAD

City
GLEN SAINT MARY

State
FL

Zip Code
32040-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342599

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERTS, GARY, , ,

Mailing Address 6206 APPIAN WAY

City
RIVERSIDE

State
CA

Zip Code
92506-4555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342802

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1037 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **ROGAN, CAROL, , ,**

Mailing Address 1032 KARESH AVENUE

City
POMONA

State
CA

Zip Code
91767-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342710

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **ROOD, JOHN, , ,**

Mailing Address 2306 STATELY OAK STREET

City
KINGWOOD

State
TX

Zip Code
77345-1898

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JOHN W. ROOD CPA

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5726.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342595

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **RUSSELL, MARGARET, , ,**

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COAST

State
FL

Zip Code
32137-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342674

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

265.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1038 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANSING, BETTY, , ,

Mailing Address 5599 HIGHWAY 70

City
CLARENDONState
TXZip Code
79226-4004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1302.50

Date of Receipt

M M	D D	Y Y Y Y
09	09	2022

Transaction ID : SA17.342618

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEVIGNY, CAROL, , ,

Mailing Address P.O. BOX 23

City
DERBYState
VTZip Code
05829-0023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	D D	Y Y Y Y
09	09	2022

Transaction ID : SA17.342607

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M	D D	Y Y Y Y
09	09	2022

Transaction ID : SA17.342756

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1039 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIMMONS, FRED, , ,

Mailing Address 3056, SH 6 N

City
QUANAHState
TXZip Code
79252-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1495.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342790

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENOState
NVZip Code
89509-2344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.15

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342604

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOWState
VAZip Code
20136-2532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342708

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

111.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1040 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342799

Amount of Each Receipt this Period

7.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City
PACEState
FLZip Code
32571-1830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.15

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342661

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City
PACEState
FLZip Code
32571-1830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

998.15

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342662

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1041 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City
PACEState
FLZip Code
32571-1830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342663

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEWState
CAZip Code
94043-4428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342629

Amount of Each Receipt this Period

1.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEWState
CAZip Code
94043-4428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

222.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342641

Amount of Each Receipt this Period

1.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1042 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342744

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STIEBER, JOLI, , ,

Mailing Address 90 SIERRA VISTA AVENUE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.54

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342850

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIERNEY, MATTHEW, , ,

Mailing Address 401 RED CEDAR COURT

City
NASHVILLE

State
TN

Zip Code
37214-4023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

382.10

Date of Receipt

09 / 09 / 2022

Transaction ID : SA17.342653

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1043 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TIERNEY, MATTHEW, , ,

Mailing Address 401 RED CEDAR COURT

City
NASHVILLEState
TNZip Code
37214-4023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342718

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOMASIK, LORI, , ,

Mailing Address 157 RESERVOIR ROAD

City
PARSIPPANYState
NJZip Code
07054-1379FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DANMARCOccupation (for Individual)
ADMN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342602

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WASSON, MARIAN, , ,

Mailing Address 1620 BUCKLEVEL RD

City
GREENWOODState
SCZip Code
29649-9755FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

Transaction ID : SA17.342642

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

65.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1044 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WATKINS, KATHERINE, , ,

Mailing Address 3913 MARATHON AVENUE

City
CASTLE HAYNE

State
NC

Zip Code
28429-5156

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.25

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342736

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342698

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELDEN, ANN, , ,

Mailing Address 7009 LEE PARK COURT

City
FALLS CHURCH

State
VA

Zip Code
22042-3907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.48

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA17.342843

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

127.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1045 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WESTERHOLD, STEVE, , ,

Mailing Address 3257 ESPLANADE CIR SE

City

RIO RANCHO

State

NM

Zip Code

87124-7621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.20

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342800

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City

BELLAIRE

State

MI

Zip Code

49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.44

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342656

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILSON, GEORGE, , ,

Mailing Address 547 DEER CREEK RUN

City

DEERFIELD BEACH

State

FL

Zip Code

33442-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ANGUS ENERGY

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1383.67

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	2	2		

Transaction ID : SA17.342699

Amount of Each Receipt this Period

12.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1046 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILSON, GEORGE, , ,

Mailing Address 547 DEER CREEK RUN

City

DEERFIELD BEACH

State

FL

Zip Code

33442-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ANGUS ENERGY

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1383.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342842

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, JEAN, , ,

Mailing Address 5644 ARAL DRIVE

City

LAKELAND

State

FL

Zip Code

33805-9615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

472.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342746

Amount of Each Receipt this Period

1.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City

GRANDVILLE

State

MI

Zip Code

49418-2259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

444.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

Transaction ID : SA17.342676

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

21.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1047 OF 1424

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342860

Amount of Each Receipt this Period

1488.60

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALLAN, LARRY, , ,

Mailing Address P.O. BOX 150671

City
GRAND RAPIDSState
MIZip Code
49515-0671FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343395

Amount of Each Receipt this Period

0.01

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENJAMIN, LYDIA, , ,

Mailing Address 8882 PADDOCK LN

City
PARKVILLEState
MDZip Code
21234-3393FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343055

Amount of Each Receipt this Period

0.15

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.16

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1048 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEST, SAMMY, , ,

Mailing Address 1807FM 3240

City
BANDERA

State
TX

Zip Code
78003-5233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343343

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOBEE, THOMAS. G, , ,

Mailing Address 8167 GARY AVE

City
WESTLAND

State
MI

Zip Code
48185-7083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343173

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342943

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1049 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRACHFELD, DONALD, , ,

Mailing Address 25 FOUR SEASONS DRIVE

City

NORTH CALDWELL

State

NJ

Zip Code

07006-6134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

811.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342969

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City

WEST MILTON

State

OH

Zip Code

45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342890

Amount of Each Receipt this Period

0.11

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CAREY, ILDIKO, , ,

Mailing Address 135 JAMES DRIVE

City

SAYLORSBURG

State

PA

Zip Code

18353-7773

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

679.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343149

Amount of Each Receipt this Period

0.03

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.49

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1050 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAREY, ILDIKO, , ,

Mailing Address 135 JAMES DRIVE

City
SAYLORSBURGState
PAZip Code
18353-7773FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

679.22

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343161

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.342973

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.342974

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4.01

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 1051 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342975

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342976

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342984

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1052 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342985

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342986

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342987

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1053 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342988

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342989

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342990

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

10.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1054 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FANKHANEL, PAMELA, , ,

Mailing Address 12216 IRVINE AVENUE NORTHWEST

City
BEMIDJI

State
MN

Zip Code
56601-7106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.80

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342945

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FANKHANEL, PAMELA, , ,

Mailing Address 12216 IRVINE AVENUE NORTHWEST

City
BEMIDJI

State
MN

Zip Code
56601-7106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.80

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342946

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTON

State
SC

Zip Code
29401-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

678.10

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343248

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

8.05

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1055 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FITZGERALD, TERRELL A, , ,

Mailing Address 3933 E. AZ. HIGHWAY 260

City
STAR VALLEYState
AZZip Code
85541-2495FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2022

Transaction ID : SA17.343310

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2022

Transaction ID : SA17.342992

Amount of Each Receipt this Period

0.45

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2022

Transaction ID : SA17.342993

Amount of Each Receipt this Period

0.45

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1056 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9								1	0			2	0	2	2

Transaction ID : SA17.343009

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9								1	0			2	0	2	2

Transaction ID : SA17.343011

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRIEDMAN, LUCILLE, , ,

Mailing Address 5200 KELLER SPRINGS RD#930

City
DALLASState
TXZip Code
75248-2748FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.17

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y			
0	9								1	0			2	0	2	2

Transaction ID : SA17.343013

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

26.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1057 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343031

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343365

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GORDON, LOUISE, , ,

Mailing Address 4075 BROOKS MILL DRIVE

City
LITHONIA

State
GA

Zip Code
30038-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

499.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343466

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1058 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.342920

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343071

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343072

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1059 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.343408

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAINS, GAYLENE, , ,

Mailing Address 9908 SOUTH GARRETT STREET

City
OKLAHOMA CITY

State
OK

Zip Code
73139-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.80

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.343411

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City
LAKE PANASOFFKEE

State
FL

Zip Code
33538-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

373.71

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.342996

Amount of Each Receipt this Period

0.02

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.12

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1060 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMILTON, RANDALL, , ,

Mailing Address 6120 WILDCAT RUN

City
WEST PALM BEACH

State
FL

Zip Code
33412-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343240

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYES, BRUCE, , ,

Mailing Address 126 ANDOVER LN

City
HUNTSVILLE

State
AL

Zip Code
35811-8630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343210

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HINKLE, MARTHA, , ,

Mailing Address 3615 , WENTWORTH DRIVE

City
ARLINGTON

State
TX

Zip Code
76001-5255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343296

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.72

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1061 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343043

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343045

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343046

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1062 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343047

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343048

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343251

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1063 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KUO, JOLENE, , ,

Mailing Address 3719 TRINITY CT

City
CHINOState
CAZip Code
91710-2066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.80

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343094

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LAND, NANCY, , ,

Mailing Address 34 COPENHAGEN AVE

City
PUNTA GORDAState
FLZip Code
33950-7316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.45

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.342948

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MALAFRONTÉ, FRANCES, , ,

Mailing Address 414 CONNORS LANE

City
STRATFORDState
CTZip Code
06614-2789FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.40

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343281

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1064 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCORMACK, BETSY, , ,

Mailing Address 722 EAGLE POINT DRIVE

City
VENICEState
FLZip Code
34285-6022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.20

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.342872

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCKENNA, JACQUELINE, , ,

Mailing Address 1004 VINCENT AVENUE

City
BRONXState
NYZip Code
10465-1525FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.40

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343026

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City
THE VILLAGESState
FLZip Code
32162-2208FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343459

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1065 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City

THE VILLAGES

State

FL

Zip Code

32162-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	9											2	0	2

Transaction ID : SA17.343460

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City

THE VILLAGES

State

FL

Zip Code

32162-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343461

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City

THE VILLAGES

State

FL

Zip Code

32162-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343462

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

35.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1066 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City
THE VILLAGESState
FLZip Code
32162-2208FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343463

Amount of Each Receipt this Period

20.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MIRABILE, LORRAINE, , ,

Mailing Address 1527 PELICAN PATH

City
THE VILLAGESState
FLZip Code
32162-2208FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343464

Amount of Each Receipt this Period

20.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOBLEY, TYMA, , ,

Mailing Address 23917 PEDERNALES DRIVE

City
SPICEWOODState
TXZip Code
78669-1491FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
R.N. NICU

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343283

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

40.69

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1067 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOBLEY, TYMA, , ,

Mailing Address 23917 PEDERNALES DRIVE

City
SPICEWOODState
TXZip Code
78669-1491FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
R.N. NICU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343304

Amount of Each Receipt this Period

0.30

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOK, LIMING, , ,

Mailing Address 29726 COJAK CIRCLE

City
BOERNEState
TXZip Code
78015-4521FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342880

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOK, LIMING, , ,

Mailing Address 29726 COJAK CIRCLE

City
BOERNEState
TXZip Code
78015-4521FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

663.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342881

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

8.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1068 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOK, LIMING, , ,

Mailing Address 29726 COJAK CIRCLE

City
BOERNEState
TXZip Code
78015-4521FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342882

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342895

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342897

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

9.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1069 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342898

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342899

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUHLESTEIN, RALPH, , ,

Mailing Address 8228 PINOSITAS RD

City
WHITTIERState
CAZip Code
90605-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

595.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342900

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1070 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NAUGLE, MARVIN, , ,

Mailing Address 737 BRANDON CIR

City
LEBANONState
MOZip Code
65536-5123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1113.42

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9												

Transaction ID : SA17.342903

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEONOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9												

Transaction ID : SA17.343036

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POTTER, DENNIS, , ,

Mailing Address 28405 FARMWAY RD

City
CALDWELLState
IDZip Code
83607-8635FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9												

Transaction ID : SA17.343383

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1071 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RAY, STARLING S, , ,

Mailing Address 22 HICKORY RD.

City
BEAUFORTState
SCZip Code
29907-2204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343243

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RICHARDS, MARY, , ,

Mailing Address 330 SIXTH ST S

City
NAPLESState
FLZip Code
34102-6349FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343153

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COASTState
FLZip Code
32137-2702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343017

Amount of Each Receipt this Period

0.04

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1072 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COASTState
FLZip Code
32137-2702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343192

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAPP, MARY, , ,

Mailing Address 1305 BERON DR.

City
METAIRIEState
LAZip Code
70003-5513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342968

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343015

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEPHENS, GLENDA L., , ,

Mailing Address 4812 CHUMUCKLA HIGHWAY

City
PACE

State
FL

Zip Code
32571-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.15

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343467

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City

SHENANDOAH

State

TX

Zip Code

77381-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343040

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City

SHENANDOAH

State

TX

Zip Code

77381-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.50

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343041

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1074 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAHState
TXZip Code
77381-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	9											2	0	2

Transaction ID : SA17.343075

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRAWBRIDGE, ROBERT, , ,

Mailing Address 606 SHENANDOAH DRIVE, 606 SHENANDO

City
SHENANDOAHState
TXZip Code
77381-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343077

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STROUP, JUDIE, , ,

Mailing Address 858 GRAND HARBOUR W

City
MIRAMAR BEACHState
FLZip Code
32550-4813FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1044.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9											2	0

Transaction ID : SA17.343184

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1075 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.34

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.342991

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TIERNEY, MATTHEW, , ,

Mailing Address 401 RED CEDAR COURT

City
NASHVILLE

State
TN

Zip Code
37214-4023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.10

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343421

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIRELLI, MARYANN, , ,

Mailing Address 1633 WEST 2ND STREET

City
BROOKLYN

State
NY

Zip Code
11223-1623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

441.45

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343219

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1076 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TURRISI, GLORIA, , ,

Mailing Address 164 LIBERTY STREET

City
PAWCATUCKState
CTZip Code
06379-1340FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343354

Amount of Each Receipt this Period

0.20

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLEState
FLZip Code
33772-2660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343458

Amount of Each Receipt this Period

0.15

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATSON, STEPHEN, , ,

Mailing Address 9243 BARRINGTON CR.

City
MISSOURI CITYState
TXZip Code
77459-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

436.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.342931

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1077 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITE, JERRY, , ,

Mailing Address 1920 SO 1ST ST

City
MINNEAPOLIS

State
MN

Zip Code
55454-1055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF MINNEAPOLIS

Occupation (for Individual)
FIREFIGHTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.70

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343122

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, ROBERT, , ,

Mailing Address 504 DEBBIE DRIVE

City
NIANTIC

State
IL

Zip Code
62551-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.85

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343022

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, ROBERT, , ,

Mailing Address 504 DEBBIE DRIVE

City
NIANTIC

State
IL

Zip Code
62551-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.85

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343024

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1078 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIRE

State
MI

Zip Code
49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343476

Amount of Each Receipt this Period

0.12

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, LINDA, , ,

Mailing Address 6721 WEST WAKEFIELD DRIVE

City
ALEXANDRIA

State
VA

Zip Code
22307-6755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

947.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343028

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343496

Amount of Each Receipt this Period

3780.50

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.47

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1079 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AKIN, SYLVIA, , ,

Mailing Address 2891 HWY 19 WEST

City
RIPLEY

State
TN

Zip Code
38063-5925

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.10

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343537

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARCHER, LYNNE, , ,

Mailing Address 20 SAINT PETERS WALK

City

SUGAR LAND

State

TX

Zip Code

77479-2525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARCHER AUTO GROUP

Occupation (for Individual)
SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15405.00

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343575

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AYERS, NORMAN PAUL, , ,

Mailing Address P.O. BOX 225

City

WASHINGTON

State

OK

Zip Code

73093-0225

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NRH

Occupation (for Individual)
PHYS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343572

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1535.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1080 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BONIN, JUDY, , ,**

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343541

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **BRUCE, LLOYD, , ,**

Mailing Address 7021 NORTH EDGEWOOD PLACE

City
TUCSON

State
AZ

Zip Code
85704-6924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343553

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **BRYANT, HOWELL, , ,**

Mailing Address 297 BRIDGEPORT ROAD

City
PINOLA

State
MS

Zip Code
39149-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343538

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1081 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETEState
ILZip Code
60417-3013FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343578

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHARLIE JR, PHILLIP C, , ,

Mailing Address P.O. BOX 8075

City
TUNTUTULIAKState
AKZip Code
99680-0075FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343536

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHARLIE JR, PHILLIP C, , ,

Mailing Address P.O. BOX 8075

City
TUNTUTULIAKState
AKZip Code
99680-0075FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343602

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

75.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1082 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHEESMAN, DONALD GRANT, , ,

Mailing Address 845 LITTLE WOODS RD

City
ELIZABETHState
ARZip Code
72531-9806FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343506

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONSTANTINI, KATHT, , ,

Mailing Address 7515 Highbury Pointe

City
CANFIELDState
OHZip Code
44406-9297FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343515

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EDWARDS, JAMES, , ,

Mailing Address 981 U.S. HIGHWAY 60

City
BARTLESVILLEState
OKZip Code
74003-4245FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343562

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1083 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FOGARTY, JOY, , ,

Mailing Address 10209 EAST CALYPSO AVENUE

City
MESAState
AZZip Code
85208-7409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343545

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOLDSTEIN, MARY, , ,

Mailing Address 2205CORSON LANE

City
NEW HOPEState
PAZip Code
18938-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343527

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREGOR, JANICE, , ,

Mailing Address 12 COVENTRY

City
NEWPORT BEACHState
CAZip Code
92660-6809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GREGOR AND CO AACOccupation (for Individual)
BOOKKEEPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343518

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1084 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARKINS, DAVID, , ,

Mailing Address 409 S. WEST STREET

City
TREMONT

State
IL

Zip Code
61568-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1959.00

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343605

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEWITT, TRACY, , ,

Mailing Address 19303 GRANTS CREEK COURT

City
HUMBLE

State
TX

Zip Code
77346-3736

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BP

Occupation (for Individual)
OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343521

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEWITT, TRACY, , ,

Mailing Address 19303 GRANTS CREEK COURT

City
HUMBLE

State
TX

Zip Code
77346-3736

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BP

Occupation (for Individual)
OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343523

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1085 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HYMOWITZ, VICTOR, , ,

Mailing Address 2000 NORTH GRAMERCY PLACE

City
LOS ANGELES

State
CA

Zip Code
90068-3617

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343501

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, KEITH, , ,

Mailing Address 8060 HOWARD P ANDERSON ROAD

City
NATHALIE

State
VA

Zip Code
24577-2950

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1635.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343571

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEWIS, SUSAN, , ,

Mailing Address 13 KAITLYN LANE

City
BLOOMSBURG

State
PA

Zip Code
17815-8833

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

608.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA17.343582

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1086 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURRAY, CHARLENE, , ,

Mailing Address 574 ALKII WAY

City
DIAMONDHEAD

State
MS

Zip Code
39525-3501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.85

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343503

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEAL, ROLLIE, , ,

Mailing Address 17 LARKSPUR LN

City
CLARKSBURG

State
WV

Zip Code
26301-6871

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343554

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, WILLIAM, , ,

Mailing Address 5819 S 118TH PLAZA

City
OMAHA

State
NE

Zip Code
68137-3513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

272.10

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343573

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1087 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NEWSOME, HELENE, , ,

Mailing Address 4043 CARLYLE LAKES BLVD

City
PALM HARBORState
FLZip Code
34685-1040FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HEALTHCAREOccupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2022

Transaction ID : SA17.343568

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAULSEN, JAIMEE, , ,

Mailing Address P.O.BOX 7948

City
SANTA ROSAState
CAZip Code
95407-0948FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2022

Transaction ID : SA17.343546

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PHILLIPS, CARMEN, , ,

Mailing Address 299 NW JASPER #2

City
DALLASState
ORZip Code
97338-1877FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1135.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2022

Transaction ID : SA17.343601

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

165.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1088 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PHILLIPS, RICHARD, , ,

Mailing Address 1906 EAST MAIN

City
MEDFORD

State
OR

Zip Code
97504-7619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.343525

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEON

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.343539

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REIFF, JULIA, , ,

Mailing Address 11150 E HIGHWAY 12

City
LOCKEFORD

State
CA

Zip Code
95237-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.343500

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1089 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSENQUIST, TRACY, , ,

Mailing Address 10 E PINERIDGE CT. #11

City
SPOKANE

State
WA

Zip Code
99208-7014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343531

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSENQUIST, TRACY, , ,

Mailing Address 10 E PINERIDGE CT. #11

City
SPOKANE

State
WA

Zip Code
99208-7014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343532

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSS, DIANE M, , ,

Mailing Address 9111 NICKELS BOULEVARD

City
BOYNTON BEACH

State
FL

Zip Code
33436-2765

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.10

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343510

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1090 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANTOSUOSSO, JOSEPH, , ,

Mailing Address 13615 209TH AVE NE

City
WOODINVILLE

State
WA

Zip Code
98077-7600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CASCADE CONSOLIDATED INDUSTRIES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.40

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343498

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTER

State
PA

Zip Code
17601-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343591

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTER

State
PA

Zip Code
17601-4450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

09 / 10 / 2022

Transaction ID : SA17.343594

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1091 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343595

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343596

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343597

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1092 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343598

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343599

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEAFFER, SYLVIA, , ,

Mailing Address 1524 ESBENSHADE ROAD

City
LANCASTERState
PAZip Code
17601-4450FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343600

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1093 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSING

State
ID

Zip Code
83639-5511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.343535

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSING

State
ID

Zip Code
83639-5511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.343604

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STROUD, STEVE, , ,

Mailing Address P.O. BOX 482

City
GOODING

State
ID

Zip Code
83330-0482

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
MECHANIC/TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / **10** / **2022**

Transaction ID : SA17.343508

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1094 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACHState
CAZip Code
92660-7120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343583

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUNGAILA, RICHARD, , ,

Mailing Address 1827 PORT STANHOPE PLACE

City
NEWPORT BEACHState
CAZip Code
92660-7120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1935.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2022

Transaction ID : SA17.343584

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343607

Amount of Each Receipt this Period

1281.75

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶

100.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1095 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTIState
MIZip Code
48197-1738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343633

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDEState
ILZip Code
60162-2203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343641

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDEState
ILZip Code
60162-2203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

249.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343644

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

0.65

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1096 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLISON, SHIRLEY, , ,

Mailing Address 2304 JUANITA AVENUE

City
SAN ANGELOState
TXZip Code
76901-1414FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343795

Amount of Each Receipt this Period

0.15

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARGYLE, ROSELYN, , ,

Mailing Address 3140 SOUTH BRENNAN ROAD

City
HEMLOCKState
MIZip Code
48626-8750FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AD HOME HEALTH CAREOccupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344051

Amount of Each Receipt this Period

0.10

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARGYLE, ROSELYN, , ,

Mailing Address 3140 SOUTH BRENNAN ROAD

City
HEMLOCKState
MIZip Code
48626-8750FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AD HOME HEALTH CAREOccupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

615.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344052

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1097 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ARGYLE, ROSELYN, , ,

Mailing Address 3140 SOUTH BRENNAN ROAD

City
HEMLOCK

State
MI

Zip Code
48626-8750

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AD HOME HEALTH CARE

Occupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.65

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344053

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARGYLE, ROSELYN, , ,

Mailing Address 3140 SOUTH BRENNAN ROAD

City
HEMLOCK

State
MI

Zip Code
48626-8750

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AD HOME HEALTH CARE

Occupation (for Individual)
R.N.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.65

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344054

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARMSTRONG, ERNESTINE, , ,

Mailing Address 4152 LAWHON CT,

City
TUCKER

State
GA

Zip Code
30084-6452

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

327.90

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343777

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1098 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BABCOCK, PAUL, , ,

Mailing Address 3 MEADOWBROOK WAY

City

SAG HARBOR

State

NY

Zip Code

11963-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343789

Amount of Each Receipt this Period

0.10

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City

STAUNTON

State

VA

Zip Code

24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343745

Amount of Each Receipt this Period

0.25

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City

STAUNTON

State

VA

Zip Code

24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343751

Amount of Each Receipt this Period

0.20

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.55

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1099 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMOREState
MDZip Code
21230-4751FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343996

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343887

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETONState
TXZip Code
75407-2548FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343888

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

7.55

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1100 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343889

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHOATE, VERA, , ,

Mailing Address 1336 CARLO DR.

City
PRINCETON

State
TX

Zip Code
75407-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343890

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DOYEN, CAROLYN, , ,

Mailing Address P.O. BOX 14

City
MAPLETON

State
ME

Zip Code
04757-0014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343968

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1101 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ECHOLS, ELIZABETH, , ,

Mailing Address 369 HUNTINGTON LAKE CIRCLE

City
PAWLEYS ISLAND

State
SC

Zip Code
29585-6174

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343876

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EVERETT, WILLIAM, , ,

Mailing Address 107 WOODBURN DRIVE

City
HAMPTON

State
VA

Zip Code
23664-1866

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2007.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344065

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FIRME, KRISTIE, , ,

Mailing Address 325 WEST STROHM STREET

City
HAXTUN

State
CO

Zip Code
80731-2501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED METHODIST

Occupation (for Individual)
PASTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343707

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1102 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIERACH, JOHN, , ,

Mailing Address 723 E. COLONIAL DR.

City
ORLANDO

State
FL

Zip Code
32803-4662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GIERACH AND GIERACH P.A.

Occupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.55

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343958

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343894

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

823.84

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343895

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.20

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1103 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLESState
ILZip Code
61341-1594FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343815

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUI, MARGARET, , ,

Mailing Address 14-63 154 STREET

City
WHITESTONEState
NYZip Code
11357-2629FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343725

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUI, MARGARET, , ,

Mailing Address 14-63 154 STREET

City
WHITESTONEState
NYZip Code
11357-2629FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

759.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343728

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.35

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1104 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUI, MARGARET, , ,

Mailing Address 14-63 154 STREET

City
WHITESTONEState
NYZip Code
11357-2629FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343730

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUI, MARGARET, , ,

Mailing Address 14-63 154 STREET

City
WHITESTONEState
NYZip Code
11357-2629FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343731

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUI, MARGARET, , ,

Mailing Address 14-63 154 STREET

City
WHITESTONEState
NYZip Code
11357-2629FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYEDOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

759.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343734

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.20

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1105 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUI, MARGARET, , ,

Mailing Address 14-63 154 STREET

City
WHITESTONE

State
NY

Zip Code
11357-2629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.33

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343735

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, REED, , ,

Mailing Address 460 S 2ND E

City
SODA SPRINGS

State
ID

Zip Code
83276-1671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.34

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343858

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, REED, , ,

Mailing Address 460 S 2ND E

City
SODA SPRINGS

State
ID

Zip Code
83276-1671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

451.34

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343859

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1106 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, REED, , ,

Mailing Address 460 S 2ND E

City
SODA SPRINGS

State
ID

Zip Code
83276-1671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.34

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343860

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSON, REED, , ,

Mailing Address 460 S 2ND E

City
SODA SPRINGS

State
ID

Zip Code
83276-1671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.34

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343861

Amount of Each Receipt this Period

20.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, REED, , ,

Mailing Address 460 S 2ND E

City
SODA SPRINGS

State
ID

Zip Code
83276-1671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

451.34

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343862

Amount of Each Receipt this Period

20.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.44

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1107 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LORENZ, ELLENE, , ,

Mailing Address 12403 169TH AVENUE SOUTHEAST

City
RENTON

State
WA

Zip Code
98059-6501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.18

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343868

Amount of Each Receipt this Period

0.18

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYTH, MARLIENE, , ,

Mailing Address 44113 RAVEN LN

City
LANCASTER

State
CA

Zip Code
93536-2315

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.35

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343857

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MAYNARD, MARCI, , ,

Mailing Address 2708 SIERRA VISTA

City
BAKERSFIELD

State
CA

Zip Code
93306-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.50

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343720

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1108 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2022

Transaction ID : SA17.343667

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2022

Transaction ID : SA17.343676

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2022

Transaction ID : SA17.343677

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

2.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1109 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343678

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343681

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NAUGLE, MARVIN, , ,

Mailing Address 737 BRANDON CIR

City
LEBANON

State
MO

Zip Code
65536-5123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1113.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343810

Amount of Each Receipt this Period

20.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1110 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NELSON, WILLIAM, , ,

Mailing Address 5819 S 118TH PLAZA

City
OMAHA

State
NE

Zip Code
68137-3513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343716

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NYE, BRUCE, , ,

Mailing Address 75209 KIOWA

City
INDIAN WELLS

State
CA

Zip Code
92210-8328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE LANGLOIS COMPANY

Occupation (for Individual)
BOARD MEMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343690

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NYE, BRUCE, , ,

Mailing Address 75209 KIOWA

City
INDIAN WELLS

State
CA

Zip Code
92210-8328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE LANGLOIS COMPANY

Occupation (for Individual)
BOARD MEMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.343691

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1111 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PARRISH, BUTCH, , ,

Mailing Address 1715 BEACH RD

City
HAMPTON

State
VA

Zip Code
23664-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.91

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344058

Amount of Each Receipt this Period

3.80

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PARRISH, BUTCH, , ,

Mailing Address 1715 BEACH RD

City
HAMPTON

State
VA

Zip Code
23664-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.91

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344060

Amount of Each Receipt this Period

0.19

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PARRISH, BUTCH, , ,

Mailing Address 1715 BEACH RD

City
HAMPTON

State
VA

Zip Code
23664-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.91

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344061

Amount of Each Receipt this Period

0.19

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1112 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAWLACYK, EILEEN, , ,

Mailing Address 7608 RICHTER LANE

City
LARSEN

State
WI

Zip Code
54947-9525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344014

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERREAULT, LAWRENCE, , ,

Mailing Address 1017 TASCOSA DRIVE

City
HUNTSVILLE

State
AL

Zip Code
35802-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.35

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343625

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSON

State
AZ

Zip Code
85750-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEON

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

796.55

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343854

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1113 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIGBY, RALPH, , ,

Mailing Address 7133 BARNWELL PLACE

City
FAYETTEVILLEState
NCZip Code
28303-2004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344012

Amount of Each Receipt this Period

0.20

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHERMBECK, JULIE, , ,

Mailing Address 2043 HAMILTON NEW LONDON RD

City
HAMILTONState
OHZip Code
45013-9540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343791

Amount of Each Receipt this Period

0.10

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTONState
WAZip Code
98058-8701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343891

Amount of Each Receipt this Period

1.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

1.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1114 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHMIDT, STEVEN, , ,

Mailing Address 14718 SE 172ND

City
RENTONState
WAZip Code
98058-8701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343892

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHOOK, JOHN L, , ,

Mailing Address 927 CHELTENHAM WAY

City
AVONState
INZip Code
46123-4139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
L.H. EXPRESS, LLCOccupation (for Individual)
DIRECTOR OF SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343827

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SILVERNALE, LYNN, , ,

Mailing Address 17 QUIET CREEK

City
FLORENCEState
KYZip Code
41042-8858FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

321.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.343636

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.85

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1115 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, DEIDRE, , ,

Mailing Address 885 LYMAN AVENUE

City
RENO

State
NV

Zip Code
89509-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2022

Transaction ID : SA17.343812

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPINNER, CAROL, , ,

Mailing Address 9712 SEAFIELD PLACE

City
BRISTOW

State
VA

Zip Code
20136-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2022

Transaction ID : SA17.343961

Amount of Each Receipt this Period

0.01

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2022

Transaction ID : SA17.343765

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.21

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1116 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343766

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343767

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343768

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1117 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALKER JR., PETE, , ,

Mailing Address 13805 CLEAR VALLEY RD

City
VICTORVILLE

State
CA

Zip Code
92392-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3156.25

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343769

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIRE

State
MI

Zip Code
49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.44

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.343719

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WORLEY, NANCY D., , ,

Mailing Address 7331 STAHL ROAD

City
NEW MARSHFIELD

State
OH

Zip Code
45766-9732

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

301.65

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344011

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1118 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344088

Amount of Each Receipt this Period

1131.50

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BAILEY, MARY BETH, , ,

Mailing Address 3 CANTERBURY COURT

City
EASTON

State
PA

Zip Code
18040-8325

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344106

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARLTON, RACHAEL, , ,

Mailing Address 8761 STATE RD 78W LOT 50

City
OKEECHOBEE

State
FL

Zip Code
34974-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1146.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344115

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

35.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1119 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARLTON, RACHAEL, , ,

Mailing Address 8761 STATE RD 78W LOT 50

City
OKEECHOBEE

State
FL

Zip Code
34974-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1146.25

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344145

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COX, JOYCE S, , ,

Mailing Address 50 CONDOLEA CT

City
LAKE OSWEGO

State
OR

Zip Code
97035-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.10

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344093

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FARRELL, HOLLY, , ,

Mailing Address 6329 MONTROSE DR.

City
DALLAS

State
TX

Zip Code
75209-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

432.50

Date of Receipt

09 / 11 / 2022

Transaction ID : SA17.344150

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1120 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, SHIRLEY, , ,

Mailing Address 816 SOUTH RUSK STREET

City
GAINESVILLE

State
TX

Zip Code
76240-5345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344098

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYES, BRAD, , ,

Mailing Address 3005 SOUTH TAMARACK AVE

City
BROKEN ARROW

State
OK

Zip Code
74012-8761

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHIROPRACTIC DOCTORS, INC

Occupation (for Individual)
CHIROPRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344144

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILSMAN, ROBERT, , ,

Mailing Address P.O. BOX 276277

City
SAN ANTONIO

State
TX

Zip Code
78227-6277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1155.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344148

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1121 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HINKLE, MARTHA, , ,

Mailing Address 3615 , WENTWORTH DRIVE

City
ARLINGTONState
TXZip Code
76001-5255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344126

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOZIAL, ELIZABETH, , ,

Mailing Address 4604 CRELLMAN WAY

City
KANNAPOLISState
NCZip Code
28081-7523FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344097

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MANNING, BETTY, , ,

Mailing Address 5430OLIVET RD

City
GEORGETOWNState
ILZip Code
61846-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344120

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

90.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1122 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAYNARD, JACQUELYNE, , ,

Mailing Address 401 HAMMACK DRIVE

City
AUSTINState
TXZip Code
78752-4123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5424.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344111

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344095

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MEINTS, MARY, , ,

Mailing Address 4020 SO FOLSOM ST

City
LINCOLNState
NEZip Code
68522-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

729.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344096

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

80.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1123 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POPPE, LORI, , ,

Mailing Address P.O. BOX 1112

City
BAKER

State
MT

Zip Code
59313-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1386.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344102

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROOD, JOHN, , ,

Mailing Address 2306 STATELY OAK STREET

City

KINGWOOD

State

TX

Zip Code

77345-1898

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JOHN W. ROOD CPA

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5726.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344094

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SONS, GARY, , ,

Mailing Address 3492 EAST CHURCH

City

FRESNO

State

CA

Zip Code

93725-1393

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BRANDON GARRETT

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 11 / 2022

Transaction ID : SA17.344110

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

207.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1124 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STAMILE, BRUCE, , ,

Mailing Address 1455 SIERRY SPRINGS DR.

City
PRESCOTTState
AZZip Code
86305-5124FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STAMILE HEAVY TRUCK PARTS INCOccupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344134

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRANBERG, WALLACE, , ,

Mailing Address 16010 S. SR27

City
ROCKFORDState
WAZip Code
99030-9705FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344135

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUTTON, KAROLYN, , ,

Mailing Address 1965 NORTH 270TH ROAD

City
BARNARDState
KSZip Code
67418-9120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344133

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

125.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1125 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILKEN, VIRGINIA, , ,

Mailing Address 1034 ORPHEUS AVE

City
ENCINITASState
CAZip Code
92024-1755FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CONTRACT LIGHTINGOccupation (for Individual)
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344122

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILKEN, VIRGINIA, , ,

Mailing Address 1034 ORPHEUS AVE

City
ENCINITASState
CAZip Code
92024-1755FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CONTRACT LIGHTINGOccupation (for Individual)
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2022

Transaction ID : SA17.344123

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUTTERMAN, SCOTT, , ,

Mailing Address 89 HUMMINGBIRD RD.

City
COVINGTONState
LAZip Code
70433-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEACON OFFSHORE ENERGYOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345138

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

10040.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1126 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REYES, DAVID, K., ,

Mailing Address 777 S. FLAGLER DRIVE
SUITE 1500City
WEST PALM BEACHState
FLZip Code
33401-6157FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REYES HOLDINGS, LLCOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344154

Amount of Each Receipt this Period

66600.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYES, J., CHRISTOPHER, ,

Mailing Address 777 S. FLAGLER DR.
SUITE 1500City
WEST PALM BEACHState
FLZip Code
33401-6157FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REYES HOLDINGS, LLCOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4236000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344155

Amount of Each Receipt this Period

1236000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REYES, M., JUDE, ,

Mailing Address 777 S FLAGLER DRIVE
SUITE 1500City
WEST PALM BEACHState
FLZip Code
33401-6157FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REYES HOLDINGS, LLCOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4236600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344156

Amount of Each Receipt this Period

1236600.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

2539200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1127 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AMERICAN ACTION NETWORK

Mailing Address 1747 PENNSYLVANIA AVE, NW
5TH FLOOR

City
WASHINGTON

State
DC

Zip Code
20006-4604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

26668712.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344153

Amount of Each Receipt this Period

5000000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AMERICAN ACTION NETWORK

Mailing Address 1747 PENNSYLVANIA AVE, NW
5TH FLOOR

City
WASHINGTON

State
DC

Zip Code
20006-4604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

26668712.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.350239

Amount of Each Receipt this Period

17559.34

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AMERICAN PETROLEUM INSTITUTE

Mailing Address 200 MASSACHUSETTS AVE NW
SUITE 1100

City
WASHINGTON

State
DC

Zip Code
20001-1429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344152

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6017559.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1128 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

09 / **12** / **2022**

Transaction ID : SA17.344157

Amount of Each Receipt this Period

1636.16

☒ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINE

State
MN

Zip Code
56535-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INC

Occupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

09 / **12** / **2022**

Transaction ID : SA17.344843

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINE

State
MN

Zip Code
56535-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INC

Occupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

730.70

Date of Receipt

09 / **12** / **2022**

Transaction ID : SA17.344845

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1129 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINEState
MNZip Code
56535-0053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INCOccupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344850

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINEState
MNZip Code
56535-0053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INCOccupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344852

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINEState
MNZip Code
56535-0053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INCOccupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

730.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344855

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1130 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINE

State
MN

Zip Code
56535-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INC

Occupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344859

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AAKHUS, PAUL, , ,

Mailing Address 112 ELM AVE P.O. BOX 53

City
ERSKINE

State
MN

Zip Code
56535-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PARADIS INC

Occupation (for Individual)
OTR DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.70

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344861

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDE

State
IL

Zip Code
60162-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

249.24

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344879

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1131 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDE

State
IL

Zip Code
60162-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.24

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344880

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDE

State
IL

Zip Code
60162-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.24

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344881

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDE

State
IL

Zip Code
60162-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

249.24

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344882

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1132 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDE

State
IL

Zip Code
60162-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.24

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344883

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDE

State
IL

Zip Code
60162-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.24

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344884

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AKERS, KERRY JEAN, , ,

Mailing Address 2242 HIGH RIDGE PKWY

City
HILLSIDE

State
IL

Zip Code
60162-2203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

249.24

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344885

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1133 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALBERTINI, RAE, , ,

Mailing Address 114 BARTRAM LANE

City
COLLEYVILLEState
TXZip Code
76034-7202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2006.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344583

Amount of Each Receipt this Period

0.22

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARTON, BONITA, , ,

Mailing Address 2209 NORTH OWENS ROAD

City
PLEASANT HILLState
OHZip Code
45359-8738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344777

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEST II, VERNON, , ,

Mailing Address 839 TEN BOOM DRIVE

City
XENIAState
OHZip Code
45385-7265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344167

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

1.37

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1134 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEST II, VERNON, , ,

Mailing Address 839 TEN BOOM DRIVE

City
XENIA

State
OH

Zip Code
45385-7265

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344169

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEST II, VERNON, , ,

Mailing Address 839 TEN BOOM DRIVE

City
XENIA

State
OH

Zip Code
45385-7265

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344791

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOBEE, THOMAS. G, , ,

Mailing Address 8167 GARY AVE

City
WESTLAND

State
MI

Zip Code
48185-7083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.95

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344648

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1135 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BODKIN, RICHARD, , ,

Mailing Address 5130 WESCOTT BLVD

City
SUMMERVILLEState
SCZip Code
29485-9043FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344619

Amount of Each Receipt this Period

0.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344768

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BORINTRAGER, ELSIE, , ,

Mailing Address 3219 MALLARD LANE

City
GOSHENState
INZip Code
46526-6196FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NATURAL BODY BALANCEOccupation (for Individual)
NUTRITIONAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344239

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1136 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERS

State
OR

Zip Code
97759-8000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344732

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERS

State
OR

Zip Code
97759-8000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344742

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERS

State
OR

Zip Code
97759-8000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344744

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1137 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERSState
ORZip Code
97759-8000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344745

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERSState
ORZip Code
97759-8000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344752

Amount of Each Receipt this Period

6.66

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERSState
ORZip Code
97759-8000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344754

Amount of Each Receipt this Period

23.33

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

30.34

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1138 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWLER, DONALD, , ,

Mailing Address P.O. BOX 8000 PMB 8089

City
SISTERSState
ORZip Code
97759-8000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2121.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344756

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BREADY, MICHAEL, , ,

Mailing Address 36334 THRASHER LANE

City
OCEAN VIEWState
DEZip Code
19970-4524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344514

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BREWER, VAN B, , ,

Mailing Address 4590 S DANYELL DR.

City
CHANDLERState
AZZip Code
85249-2630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

501.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344784

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1139 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAREY, ILDIKO, , ,

Mailing Address 135 JAMES DRIVE

City
SAYLORSBURG

State
PA

Zip Code
18353-7773

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

679.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344919

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAREY, ILDIKO, , ,

Mailing Address 135 JAMES DRIVE

City
SAYLORSBURG

State
PA

Zip Code
18353-7773

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

679.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344920

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARROWAY, RON, , ,

Mailing Address 361 TRAIL CROSSING LANE

City
INMAN

State
SC

Zip Code
29349-5600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1045.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344481

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

10.45

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1140 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344546

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASSON, JOSEPH, , ,

Mailing Address 345 HUBBARD LANE

City
CRETE

State
IL

Zip Code
60417-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344679

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COX, JOYCE S, , ,

Mailing Address 50 CONDOLEA CT

City
LAKE OSWEGO

State
OR

Zip Code
97035-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

248.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344580

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1141 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DOYEN, CAROLYN, , ,

Mailing Address P.O. BOX 14

City
MAPLETONState
MEZip Code
04757-0014FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344525

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLIOTT, JODI, , ,

Mailing Address P.O.BOX 756

City
ORLANDState
CAZip Code
95963-0756FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344798

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344221

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1142 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344222

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344223

Amount of Each Receipt this Period

6.75

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EMILSON, CARL, , ,

Mailing Address 435 S E KRUEGER PKWY

City
STUARTState
FLZip Code
34996-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF. PSSIOccupation (for Individual)
IMPORTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1975.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344226

Amount of Each Receipt this Period

0.24

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

9.49

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1143 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FINKELSTEIN, SARAH, , ,

Mailing Address 21 GEORGE STREET

City
CHARLESTON

State
SC

Zip Code
29401-1489

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344895

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344419

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GIESE, KENNETH, , ,

Mailing Address 1758 SHADOW LAWN ROAD

City
MOSINEE

State
WI

Zip Code
54455-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

823.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344420

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1144 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GIESECKE, RICHARD, , ,

Mailing Address 1807 HWY281 STE 4

City
MARBLE FALLS

State
TX

Zip Code
78654-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344511

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344775

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOLDSTEIN, MARY, , ,

Mailing Address 2205CORSON LANE

City
NEW HOPE

State
PA

Zip Code
18938-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

876.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344218

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1145 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLES

State
IL

Zip Code
61341-1594

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.05

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344189

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLES

State
IL

Zip Code
61341-1594

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.05

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344190

Amount of Each Receipt this Period

4.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLES

State
IL

Zip Code
61341-1594

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

654.05

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344191

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1146 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLESState
ILZip Code
61341-1594FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.05

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

Transaction ID : SA17.344192

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLESState
ILZip Code
61341-1594FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.05

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

Transaction ID : SA17.344193

Amount of Each Receipt this Period

2.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODIN, BEN, , ,

Mailing Address 424 SCHUMACHER STREET

City
MARSEILLESState
ILZip Code
61341-1594FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

654.05

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

Transaction ID : SA17.344194

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1147 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344528

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HEUER, RANDY, , ,

Mailing Address 1218 SUNRISE CIRCLE

City
MUSCATINE

State
IA

Zip Code
52761-3631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MUSCATINE COUNTY ABSTRACT COMPANY

Occupation (for Individual)
ABTRACTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.50

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344288

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWELLS, SALLY, , ,

Mailing Address 7311 ROUNDROCK ROAD

City
DALLAS

State
TX

Zip Code
75248-5215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

342.55

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344848

Amount of Each Receipt this Period

1.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1148 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOWELLS, SALLY, , ,

Mailing Address 7311 ROUNDROCK ROAD

City
DALLAS

State
TX

Zip Code
75248-5215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.55

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344854

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344265

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTON

State
TX

Zip Code
77056-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344270

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1149 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344272

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344273

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KABELE, JEAN, , ,

Mailing Address 1120 W DREW ST

City
HOUSTONState
TXZip Code
77006-1222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

217.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344893

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1150 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KABELE, JEAN, , ,

Mailing Address 1120 W DREW ST

City
HOUSTONState
TXZip Code
77006-1222FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344894

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KESLER, ROBERT, , ,

Mailing Address 10470 TURNER ROAD

City
ROSWELLState
GAZip Code
30076-2437FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344741

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAYState
OKZip Code
73052-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344810

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

10.45

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1151 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344811

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344812

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344815

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1152 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344816

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344817

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344819

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

32.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1153 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344821

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344823

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344828

Amount of Each Receipt this Period

4.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1154 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, BILL, , ,

Mailing Address 809SW3RD

City
LINDSAY

State
OK

Zip Code
73052-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.30

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344830

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KIRBY, KATHY, , ,

Mailing Address 412 WENNINGTON PL

City
GREER

State
SC

Zip Code
29651-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.70

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344863

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUEHNE, CARL, , ,

Mailing Address 4479 HERITAGE HEIGHTS ROAD

City
DE PERE

State
WI

Zip Code
54115-9254

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CK HOLDINGS

Occupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.50

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344210

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1155 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MACHADO, JACKIE, , ,

Mailing Address 451SILVERFALLS ROAD

City
CLEVELANDState
GAZip Code
30528-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344462

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MALAFRONTÉ, FRANCES, , ,

Mailing Address 414 CONNORS LANE

City
STRATFORDState
CTZip Code
06614-2789FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344488

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCMANS, MICHAEL, , ,

Mailing Address 29 CROCKERS LANE

City
WEST ROXBURYState
MAZip Code
02132-3501FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF BOSTONOccupation (for Individual)
FIREFIGHTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

596.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344325

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1156 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCMANS, MICHAEL, , ,

Mailing Address 29 CROCKERS LANE

City
WEST ROXBURY

State
MA

Zip Code
02132-3501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF BOSTON

Occupation (for Individual)
FIREFIGHTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344326

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, ANNAMAY, , ,

Mailing Address 732 VILLITA LANE

City
LADY LAKE

State
FL

Zip Code
32159-9128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344250

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344671

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1157 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344673

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, CRAIG, , ,

Mailing Address 954 BEACH FERN CT

City
NEW SMYRNA BEACH

State
FL

Zip Code
32168-7940

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344715

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKI

State
TN

Zip Code
38478-4630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHS

Occupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344321

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.20

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1158 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City
PULASKIState
TNZip Code
38478-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRHSOccupation (for Individual)
SURGICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1029.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2022

Transaction ID : SA17.344322

Amount of Each Receipt this Period

5.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORAN, FRANK, , ,

Mailing Address P.O. BOX 4848

City
SHREVEPORTState
LAZip Code
71134-0848FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2022

Transaction ID : SA17.344814

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOSS, PATRICIA, , ,

Mailing Address 2665 WHISPERING PINE

City
TWIN FALLSState
IDZip Code
83301-8939FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

430.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2022

Transaction ID : SA17.344841

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

5.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1159 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NAUGLE, MARVIN, , ,

Mailing Address 737 BRANDON CIR

City
LEBANON

State
MO

Zip Code
65536-5123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1113.42

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344569

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NICHOLS, CURTIS, , ,

Mailing Address 424 LOBELIA RD

City
SAINT AUGUSTINE

State
FL

Zip Code
32086-6518

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MARSHALL CREEK CDD

Occupation (for Individual)
LANDSCAPE MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344517

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICHOLS, CURTIS, , ,

Mailing Address 424 LOBELIA RD

City
SAINT AUGUSTINE

State
FL

Zip Code
32086-6518

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MARSHALL CREEK CDD

Occupation (for Individual)
LANDSCAPE MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344521

Amount of Each Receipt this Period

0.15

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.25

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1160 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIEMEYER, GREG, , ,

Mailing Address 7908 STANFORD

City
DALLASState
TXZip Code
75225-8210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOORE-HARALSONOccupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344713

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OWENS, MARSHA ANN, , ,

Mailing Address 17807 WOOD BARK ROAD

City
SPRINGState
TXZip Code
77379-6120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344652

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PARRISH, BUTCH, , ,

Mailing Address 1715 BEACH RD

City
HAMPTONState
VAZip Code
23664-1935FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344499

Amount of Each Receipt this Period

0.19

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.34

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1161 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PETRY, JUDITH, , ,

Mailing Address 1111 BENTWOOD PLACE CT

City
LOUISVILLEState
KYZip Code
40207-2303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344626

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEONOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344181

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PORACH, BARBARA, , ,

Mailing Address 200 KINGFISHER WAY, COLONIAL HGTS,

City
COLONIAL HEIGHTSState
VAZip Code
23834-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344251

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1162 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POZZI, ROBERT, , ,

Mailing Address 3733 FALSTONE ROAD

City
NORTH CHESTERFIELDState
VAZip Code
23234-3769FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344588

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POZZI, ROBERT, , ,

Mailing Address 3733 FALSTONE ROAD

City
NORTH CHESTERFIELDState
VAZip Code
23234-3769FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344591

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COASTState
FLZip Code
32137-2702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344284

Amount of Each Receipt this Period

0.05

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1163 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHLICHTINGER, CARL, , ,

Mailing Address 97 DURANT AVENUE

City
STATEN ISLANDState
NYZip Code
10306-3853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF - PART TIMEOccupation (for Individual)
PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9							1	2				
2022													

Transaction ID : SA17.344195

Amount of Each Receipt this Period

0.35

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNYDER, ROBERT A, , ,

Mailing Address P O BOX 141

City
FALLS VILLAGEState
CTZip Code
06031-0141FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDWARD R HAMILTON,BOOKSELLEROccupation (for Individual)
SHIP BOOKS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.60

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9							1	2				
2022													

Transaction ID : SA17.344933

Amount of Each Receipt this Period

0.25

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRAUSS, ROBERT, , ,

Mailing Address 8023 LAKEFOREST

City
SAN ANTONIOState
TXZip Code
78239-3506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.45

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9							1	2				
2022													

Transaction ID : SA17.344508

Amount of Each Receipt this Period

0.10

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.70

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1164 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344243

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344244

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344245

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1165 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344246

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344248

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TROCHTA, JOSEPH F., , ,

Mailing Address 4025 TEALWOOD

City
AUSTINState
TXZip Code
78731-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

786.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344249

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1166 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344449

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344451

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344452

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1167 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344453

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITYState
SDZip Code
57702-8509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344455

Amount of Each Receipt this Period

0.20

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VALDES, LINDA, , ,

Mailing Address 9558 119TH WAY

City
SEMINOLEState
FLZip Code
33772-2660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

561.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344494

Amount of Each Receipt this Period

0.10

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2.30

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1168 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWNState
NJZip Code
08057-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9							1	2				
2022													

Transaction ID : SA17.344896

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, JERRY, , ,

Mailing Address 1920 SO 1ST ST

City
MINNEAPOLISState
MNZip Code
55454-1055FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF MINNEAPOLISOccupation (for Individual)
FIREFIGHTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.70

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9							1	2				
2022													

Transaction ID : SA17.344575

Amount of Each Receipt this Period

0.35

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, JIMMY, , ,

Mailing Address 1075 MOTORCOACH DRIVE

City
POLK CITYState
FLZip Code
33868-5113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

636.85

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9							1	2				
2022													

Transaction ID : SA17.344918

Amount of Each Receipt this Period

0.25

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

0.95

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WRIGHT, LINDA, , ,

Mailing Address 6721 WEST WAKEFIELD DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22307-6755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

947.30

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344540

Amount of Each Receipt this Period

0.35

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZENEBERG, ED, , ,

Mailing Address 4661 BLACKFOOT DR. SW

City

GRANDVILLE

State

MI

Zip Code

49418-2259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.65

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344446

Amount of Each Receipt this Period

0.05

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2977040.52

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344950

Amount of Each Receipt this Period

5032.75

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE ATTRIBUTION
BELOW FOR ALL DONORS ABOVE ITEMIZATION
THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1170 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ADAMS, JOHN, , ,

Mailing Address 2039 COLLEGEWOOD STREET

City
YPSILANTIState
MIZip Code
48197-1738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345126

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BATTLE, DEBBIE, , ,

Mailing Address 2 BRENNAN COURT

City
AMARILLOState
TXZip Code
79121-1058FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2221.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345056

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEST II, VERNON, , ,

Mailing Address 839 TEN BOOM DRIVE

City
XENIAState
OHZip Code
45385-7265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345106

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BILLING, PATRICIA B, , ,

Mailing Address 613 FOX RUN DR.

City
JONESBORO

State
AR

Zip Code
72404-0511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.30

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344972

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOGATIN, WAYNE, , ,

Mailing Address 13776 COUNTY ROAD 1

City
LONGMONT

State
CO

Zip Code
80504-9632

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345011

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City
STAUNTON

State
VA

Zip Code
24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HORSE BOARDING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.05

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345072

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1172 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOULWARE, MICHAEL, , ,

Mailing Address 502 EAST FORT AVENUE

City
BALTIMORE

State
MD

Zip Code
21230-4751

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.83

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344981

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRAY, TAMBRA, , ,

Mailing Address 14017HIGH BRIDGE ROAD

City
MONROE

State
WA

Zip Code
98272-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.25

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345124

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRUMBAUGH, PHILIP, , ,

Mailing Address 108 PHILIP DR.

City
WEST MILTON

State
OH

Zip Code
45383-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2237.63

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344962

Amount of Each Receipt this Period

12.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1173 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BYRANNON, DANNY, , ,

Mailing Address 837 COUNTRY CLUB DR.

City
NORTH PALM BEACH

State
FL

Zip Code
33408-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DANNY P BRANNON P A

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345042

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BYRNE, DAVID, , ,

Mailing Address 18131 LANGLOIS ROAD

City
DESERT HOT SPRINGS

State
CA

Zip Code
92241-8398

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345081

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARRESCIA, ROBERT, , ,

Mailing Address 9515 W. WHITTINGHAM POINT

City
MAPLETON

State
IL

Zip Code
61547-9329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345019

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1174 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CARTER, CHRISTOPHER W, , ,

Mailing Address 103 SOUTH GALA COURT

City
BONAIRE

State
GA

Zip Code
31005-4033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344993

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, CHRISTOPHER W, , ,

Mailing Address 103 SOUTH GALA COURT

City
BONAIRE

State
GA

Zip Code
31005-4033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345079

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLASON, LEE, , ,

Mailing Address 11130 NORTH144TH STREET

City
WAVERLY

State
NE

Zip Code
68462-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
TRUCKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344986

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

121.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1175 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DANIELS, BOBBY, , ,

Mailing Address 450 JOE LEWIS RD.

City
HAUGHTONState
LAZip Code
71037-7581FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

Transaction ID : SA17.344978

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, MARIE, , ,

Mailing Address 143 RICHMOND DR.

City
BLOOMINGDALEState
GAZip Code
31302-9673FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

Transaction ID : SA17.345070

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTEState
CAZip Code
92673-6843FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

526.70

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

Transaction ID : SA17.345067

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DIER, ROBERT, , ,

Mailing Address 82 AVENIDA CRISTAL

City
SAN CLEMENTE

State
CA

Zip Code
92673-6843

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.70

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345069

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DONAHUE, NANCY, , ,

Mailing Address 10139 KRESS ROAD

City
PINCKNEY

State
MI

Zip Code
48169-9373

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.60

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345064

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGA

State
WY

Zip Code
82331-0399

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345068

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1177 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGA

State
WY

Zip Code
82331-0399

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345117

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLORES, ELVYN PEREZ, , ,

Mailing Address 1145 NW 45 ST MIAMI FL

City
MIAMI

State
FL

Zip Code
33127-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFEMPLOMENT

Occupation (for Individual)
SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345087

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLORES, RACHEL, , ,

Mailing Address 195 BLOSSOM HILL ROAD LOT 183

City
SAN JOSE

State
CA

Zip Code
95123-2351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344989

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1178 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRALEY, DAVID, , ,

Mailing Address 28 LINCOLN DRIVE

City
NORTH SMITHFIELD

State
RI

Zip Code
02896-6956

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344961

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILBERTSON, ONDRA, , ,

Mailing Address 8719 CALLE QUEBRADA

City
RANCHO CUCAMONGA

State
CA

Zip Code
91730-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345028

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GUERRERO, FEDERICO, , ,

Mailing Address 2082 BENTWOOD DRIVE

City
FLORESVILLE

State
TX

Zip Code
78114-6728

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345093

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1179 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUGGINO, LINDA, , ,

Mailing Address 27 PLYMOUTH AVE

City
MINEOLA

State
NY

Zip Code
11501-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.58

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345073

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HALVERSON, LEE, , ,

Mailing Address 444 CR 482S

City

LAKE PANASOFFKEE

State

FL

Zip Code

33538-6044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.71

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345094

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARDY, ALEGRA, , ,

Mailing Address 1873 LYNNE AVENUE

City

HENDERSON

State

NC

Zip Code

27536-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.45

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345004

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1180 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARLFINGER, CHARLES, , ,

Mailing Address 7830 MANASOTA KEY ROAD

City
ENGLEWOODState
FLZip Code
34223-9359FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FBMOccupation (for Individual)
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1442.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345123

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARLFINGER, CHARLES, , ,

Mailing Address 7830 MANASOTA KEY ROAD

City
ENGLEWOODState
FLZip Code
34223-9359FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FBMOccupation (for Individual)
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1442.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345127

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEUSSER, SYDNEY, , ,

Mailing Address P. I. BOX1658

City
DAWSONVILLEState
GAZip Code
30534-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

604.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345060

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

82.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1181 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUNTSINGER, BILL, , ,

Mailing Address 33418 TWO CREEKS CROSSING

City
HEMPSTEADState
TXZip Code
77445-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
CONSULTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344994

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345039

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNS, SUSAN, , ,

Mailing Address 5604 DOLIVER DRIVE

City
HOUSTONState
TXZip Code
77056-2322FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1134.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345040

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

295.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 1182 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KENDRICK, KAREN, , ,

Mailing Address 1824 WESTBROOK VILLAGE DRIVE

City
COLUMBUSState
OHZip Code
43228-3688FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2022

Transaction ID : SA17.344979

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KITCHELL, GLENN, , ,

Mailing Address 6301 JACK RABBIT JCT

City
FARMINGTONState
NMZip Code
87402-8797FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
(MTC) MED TRANSOccupation (for Individual)
HELICOPTER AIR AMBULANCE PILO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2022

Transaction ID : SA17.345084

Amount of Each Receipt this Period

35.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUEHNE, CARL, , ,

Mailing Address 4479 HERITAGE HEIGHTS ROAD

City
DE PEREState
WIZip Code
54115-9254FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CK HOLDINGSOccupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2022

Transaction ID : SA17.345095

Amount of Each Receipt this Period

7.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

77.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1183 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345110

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345113

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

486.80

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345116

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1184 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345118

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KYTLE, ROBERT, , ,

Mailing Address 1313 MEADOW LANE

City
SULPHUR

State
LA

Zip Code
70663-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.80

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345120

Amount of Each Receipt this Period

7.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LANGLOIS, JANET, , ,

Mailing Address 5943 FALLING TREE LANE

City
RANCHO CUCAMONGA

State
CA

Zip Code
91737-2815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
DESIGNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345045

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1185 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MASSEY, STEVEN, , ,

Mailing Address 11277 SOUTH 274TH EAST AVENUE

City
COWETAState
OKZip Code
74429-3402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9							1	2			2	0	2	2

Transaction ID : SA17.345059

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCALLISTER, TERRY, , ,

Mailing Address 2100 STRATFORD PARK DRIVE

City
FORT WORTHState
TXZip Code
76103-2633FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9							1	2			2	0	2	2

Transaction ID : SA17.345063

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCCLAIN, JUANITA, , ,

Mailing Address 2196 N W ANDREA ST

City
ROSEBURGState
ORZip Code
97471-1714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.10

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9							1	2			2	0	2	2

Transaction ID : SA17.344995

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1186 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCLAIN, JUANITA, , ,

Mailing Address 2196 N W ANDREA ST

City
ROSEBURG

State
OR

Zip Code
97471-1714

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.10

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344996

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCHENRY, BARBARA JEAN, , ,

Mailing Address 312 ANITA AVENUE

City
KELLER

State
TX

Zip Code
76248-2437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345137

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOBLEY, TYMA, , ,

Mailing Address 23917 PEDERNALES DRIVE

City
SPICEWOOD

State
TX

Zip Code
78669-1491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
R.N. NICU

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.75

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345013

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1187 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MUELLER, CHRISTINE, , ,

Mailing Address 1743 BOULDER DR.

City
DARIEN

State
IL

Zip Code
60561-5922

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.97

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344974

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEAL, ROLLIE, , ,

Mailing Address 17 LARKSPUR LN

City
CLARKSBURG

State
WV

Zip Code
26301-6871

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344983

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NICHOLS, SUSAN, , ,

Mailing Address 501 JAMAICA WAY

City
BAKERSFIELD

State
CA

Zip Code
93309-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

256.70

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344953

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1188 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NOLTE, JOE, , ,

Mailing Address 77 MIDDENDORF LA

City
TOWANDA

State
PA

Zip Code
18848-7896

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345005

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NOWAK, DANNY, , ,

Mailing Address 715 GLENWOOD AVENUE

City
JACKSON

State
MI

Zip Code
49203-2938

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345017

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PACKA, DOUGLAS, , ,

Mailing Address P.O. BOX 1623

City
PALMER

State
AK

Zip Code
99645-1623

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345015

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1189 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PALERMO, MARK, , ,

Mailing Address 246 GARFIELD PLACD

City
BROOKLYNState
NYZip Code
11215-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

LAWYER, INVESTOR, CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

877.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345044

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POLLY, MARY, , ,

Mailing Address 8080 E CORTE DE LA FAMILIA

City
TUCSONState
AZZip Code
85750-2855FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RAYTHEON

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344955

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RAY, STARLING S, , ,

Mailing Address 22 HICKORY RD.

City
BEAUFORTState
SCZip Code
29907-2204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345029

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1190 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUSSELL, MARGARET, , ,

Mailing Address 5652 N OCEANSHORE BLVD

City
PALM COASTState
FLZip Code
32137-2702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345018

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKONState
OKZip Code
73099-5781FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345098

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKONState
OKZip Code
73099-5781FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

579.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345099

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1191 OF 1424

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWARZ, KATHLEEN, , ,

Mailing Address 508 WAR EAGLE LN

City
YUKON

State
OK

Zip Code
73099-5781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.10

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345100

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, KENNETH, , ,

Mailing Address 9225 EAST TANQUE VERDE ROAD, APT 4

City
TUCSON

State
AZ

Zip Code
85749-7796

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.33

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345006

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOUKUP, MA, , ,

Mailing Address 6 WOODCOCK LANE

City
LINCOLN

State
MA

Zip Code
01773-4513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1270.00

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344975

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1010.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1192 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345024

Amount of Each Receipt this Period

8.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPRINKEL, CINDY, , ,

Mailing Address 5982 ASHLEY LANE

City
MARSINGState
IDZip Code
83639-5511FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.345071

Amount of Each Receipt this Period

8.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STROUP, JUDIE, , ,

Mailing Address 858 GRAND HARBOUR W

City
MIRAMAR BEACHState
FLZip Code
32550-4813FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1044.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2022

Transaction ID : SA17.344960

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

46.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1193 OF 1424

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUTTON, KAROLYN, , ,

Mailing Address 1965 NORTH 270TH ROAD

City
BARNARD

State
KS

Zip Code
67418-9120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345082

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, SHAJI, , ,

Mailing Address 2526 TERRA COTTA CIRCLE

City
HERNDON

State
VA

Zip Code
20171-4698

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345023

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMAS, SUSAN, , ,

Mailing Address P.O. BOX 5853

City
EAGLE

State
CO

Zip Code
81631-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOUBLE DUTCH DESIGNS LLC

Occupation (for Individual)
GRAPHIC ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

460.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.344991

Amount of Each Receipt this Period

6.50

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

46.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1194 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TSCHETTER, NANCY E, , ,

Mailing Address 22907 FLUME LANE

City
RAPID CITY

State
SD

Zip Code
57702-8509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.20

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.344987

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WADKINS, SHIRLEY, , ,

Mailing Address 3005 NORTHAVEN STREET

City
CORINTH

State
MS

Zip Code
38834-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.15

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345021

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1973.55

Date of Receipt

09 / 12 / 2022

Transaction ID : SA17.345053

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1195 OF 1424

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WESTERHOLD, STEVE, , ,

Mailing Address 3257 ESPLANADE CIR SE

City
RIO RANCHO

State
NM

Zip Code
87124-7621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.20

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345119

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, PAUL, , ,

Mailing Address 370 CARL CREEK TRAIL. NW

City
KENNESAW

State
GA

Zip Code
30152-5732

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
AIRCRAFT MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345046

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILDMAN, DOUGLAS, , ,

Mailing Address 8473 CLAM LAKE ROAD

City
BELLAIRE

State
MI

Zip Code
49615-9378

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

313.44

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA17.345085

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 1196 OF 1424
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINN, BRAD, , ,

Mailing Address 123 EAST WOODLAND DRIVE

City
EL DORADOState
ARZip Code
71730-3125FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09	/	12	/	2022

Transaction ID : SA17.345107

Amount of Each Receipt this Period

7.50

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOODY, STEVE, , ,

Mailing Address 2366 SANDERLING DR.

City
ROCK HILLState
SCZip Code
29732-7790FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09	/	12	/	2022

Transaction ID : SA17.345052

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ►

17.50

TOTAL This Period (last page this line number only)..... ►

17744531.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1197 OF 1424

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fee

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.229

Amount of Each Disbursement this Period

477.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDIMailing Address 1593 Spring Hill Road
Suite 400City
Tysons CornerState
VAZip Code
22182Purpose of Disbursement
Donor database services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.230

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fee

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.231

Amount of Each Disbursement this Period

715.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	4	4	2	.	5	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1198 OF 1424

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant fee

003

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB.232

Amount of Each Disbursement this Period

0.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fee

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB.233

Amount of Each Disbursement this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

55.04

TOTAL This Period (last page this line number only).....▶

1497.54

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1199 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Aadland for Colorado

Mailing Address PO Box 630552

City
LittletonState
COZip Code
80163Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Aadland, Erik, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CO

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00781492**Transaction ID : SB.173**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Aadland for Colorado

Mailing Address PO Box 630552

City
LittletonState
COZip Code
80163Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Aadland, Erik, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00781492**Transaction ID : SB.174**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ashley Hinson for Congress

Mailing Address PO Box 811

City
MarionState
IAZip Code
52302Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Hinson, Ashley, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00706267**Transaction ID : SB.159**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1200 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Chris West for Congress, Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address 165 Big Star Drive

City
ThomasvilleState
GAZip Code
31757Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

West, Christopher, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: GA

District: 02

FEC Identification Number

C C00796524

Transaction ID : SB.179

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ciscomani for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address 2211 E Highland Ave
Suite 210City
PhoenixState
AZZip Code
85016Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Ciscomani, Juan, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ

District: 06

FEC Identification Number

C C00786194

Transaction ID : SB.162

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of David Schweikert

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address 8175 East Evans Road
#13176City
ScottsdaleState
AZZip Code
85267Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Schweikert, David, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District: 01

FEC Identification Number

C C00540617

Transaction ID : SB.158

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1201 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Friends of David Schweikert

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address 8175 East Evans Road
#13176City
ScottsdaleState
AZZip Code
85267Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Schweikert, David, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ

District: 01

FEC Identification Number

C C00540617**Transaction ID : SB.181**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. George Logan for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address 26 Catoonah Street
Box 72City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Logan, George, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CT

District: 05

FEC Identification Number

C C00784926**Transaction ID : SB.178**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John Duarte for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address 9460 Tegner Road

City
HilmarState
CAZip Code
95324Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Duarte, John, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 13

FEC Identification Number

C C00808279**Transaction ID : SB.164**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1202 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Kelly Cooper for CongressMailing Address 101 Colorado Street
Box 43City
ChandlerState
AZZip Code
85244Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Cooper, Kelly, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				2	5				2	0	2	2

FEC Identification Number

C C00792085**Transaction ID : SB.160**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kelly Cooper for CongressMailing Address 101 Colorado Street
Box 43City
ChandlerState
AZZip Code
85244Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Cooper, Kelly, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify)

State: AZ District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				2	5				2	0	2	2

FEC Identification Number

C C00792085**Transaction ID : SB.161**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ken Calvert for Congress

Mailing Address PO Box 2438

City
CoronaState
CAZip Code
92878Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Calvert, Ken, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 41

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				2	5				2	0	2	2

FEC Identification Number

C C00257337**Transaction ID : SB.169**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1203 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Kevin Kiley for Congress

Mailing Address 9458 Treelake Rd

City
Granite BayState
CAZip Code
95746Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kiley, Kevin, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00801985**Transaction ID : SB.163**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kirkmeyer for Congress

Mailing Address PO box 468

City
Fort UptonState
COZip Code
80621Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kirkmeyer, Barbara, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CO

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00794602**Transaction ID : SB.175**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kirkmeyer for Congress

Mailing Address PO box 468

City
Fort UptonState
COZip Code
80621Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kirkmeyer, Barbara, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00794602**Transaction ID : SB.176**

Amount of Each Disbursement this Period

4892.00

Primary debt

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

14892.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1204 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Maryott for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address 31726 Rancho Viejo Rd.
Suite 101City
San Juan CapistranoState
CAZip Code
92675Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Maryott, Brian, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 49

FEC Identification Number

C C00666859

Transaction ID : SB.172

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Matt Jacobs for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address PO Box 4723

City
Thousand OaksState
CAZip Code
91359Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Jacobs, Matt, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 26

FEC Identification Number

C C00767046

Transaction ID : SB.166

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michelle Steel for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

Mailing Address 92A Surfside Ave. #472

City
SurfsideState
CAZip Code
90743Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Steel, Michelle, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 45

FEC Identification Number

C C00704981

Transaction ID : SB.170

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1205 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Mike France CT2

Mailing Address PO Box 110107

City
TrumbullState
CTZip Code
06611Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

France, Mike, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CT

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2022

FEC Identification Number

C C00768689

Transaction ID : SB.177

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Garcia for Congress

Mailing Address 9070 Irvine Center Drive #150

City
IrvineState
CAZip Code
92618Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Garcia, Michael, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2022

FEC Identification Number

C C00701102

Transaction ID : SB.167

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Miller-Meeks for Congress

Mailing Address PO Box 33

City
OttomwaState
IAZip Code
52501Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Miller-Meeks, Mariannette, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2022

FEC Identification Number

C C00558825

Transaction ID : SB.180

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1206 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Scott Baugh For CongressMailing Address 4040 MacArthur Blvd.
Suite 200City
Newport BeachState
CAZip Code
92660Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Baugh, Scott, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 47

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00798322**Transaction ID : SB.171**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Valadao for Congress

Mailing Address 5132 North Palm Avenue #227

City
FresnoState
CAZip Code
93704Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Valadao, David, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 22

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00499392**Transaction ID : SB.165**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Young Kim for Congress

Mailing Address PO Box 2186

City
FullertonState
CAZip Code
92837Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kim, Young, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 40

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C C00665638**Transaction ID : SB.168**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1207 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Alek for Oregon

Mailing Address PO Box 347

City
WinchesterState
ORZip Code
97495Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Skarlatos, Alek, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: OR

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00715854**Transaction ID : SB.214**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amanda Adkins for Congress

Mailing Address 4707 W 135th Street

City
LeawoodState
KSZip Code
66224Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Adkins, Amanda, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: KS

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00717876**Transaction ID : SB.189**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Becker for CongressMailing Address 50 S. Jones Blvd.
Suite 201City
Las VegasState
NVZip Code
89107Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Becker, April, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00769414**Transaction ID : SB.210**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1208 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Bo Hines for CongressMailing Address 1441 E Broad Street
#214City
Fuquay VarinaState
NCZip Code
27526Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Hines, Robert, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2022

FEC Identification Number

C C00766162**Transaction ID : SB.205**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brian Fitzpatrick for All of Us

Mailing Address PO Box 939

City
LanghorneState
PAZip Code
19047Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Fitzpatrick, Brian, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify)

State: PA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2022

FEC Identification Number

C C00607416**Transaction ID : SB.218**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cassy for Congress

Mailing Address PO Box 450970

City
LaredoState
TXZip Code
78045Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Garcia, Cassandra, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 28

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2022

FEC Identification Number

C C00797282**Transaction ID : SB.184**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1209 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Committee to Elect Jennifer-Ruth Green

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Mailing Address PO Box 243

City
Crown PointState
INZip Code
46308Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Green, Jennifer-Ruth, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 17

FEC Identification Number

C C00782797**Transaction ID : SB.197**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Elect Sam Peters

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Mailing Address PO Box 752555

City
Las VegasState
NVZip Code
89136Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Peters, Samuel, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: NV

District: 04

FEC Identification Number

C C00700898**Transaction ID : SB.211**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Elect Sam Peters

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Mailing Address PO Box 752555

City
Las VegasState
NVZip Code
89136Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Peters, Samuel, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 04

FEC Identification Number

C C00700898**Transaction ID : SB.212**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1210 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Don Bacon for Congress

Mailing Address PO Box 391368

City
OmahaState
NEZip Code
68139Purpose of Disbursement
Contribution

011

Candidate Name

Bacon, Donald, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: NE

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00575167**Transaction ID : SB.206**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eli Crane for Congress

Mailing Address PO Box 1950

City
CortaroState
AZZip Code
85652Purpose of Disbursement
Contribution

011

Candidate Name

Crane, Eli, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00784934**Transaction ID : SB.190**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Eli Crane for Congress

Mailing Address PO Box 1950

City
CortaroState
AZZip Code
85652Purpose of Disbursement
Contribution

011

Candidate Name

Crane, Eli, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00784934**Transaction ID : SB.191**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1211 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Esther for Congress

Mailing Address PO Box 117

City
East MolineState
ILZip Code
61244Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

King, Esther, Joy, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 17

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00716498**Transaction ID : SB.196**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Finstad for Congress

Mailing Address PO Box 923

City
New UlmState
MNZip Code
56073Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Finstad, Brad, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MN

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00807743**Transaction ID : SB.202**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Allan Fung

Mailing Address PO Box 8542

City
CranstonState
RIZip Code
02920Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Fung, Allan, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: RI

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00805002**Transaction ID : SB.182**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1212 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Friends of Jeremy Shaffer

Mailing Address PO Box 391

City
GibsoniaState
PAZip Code
15044Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Shaffer, Jeremy, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 17

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00803726**Transaction ID : SB.221**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Iowans for Zach Nunn

Mailing Address PO Box 11

City
BondurantState
IAZip Code
50035Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Nunn, Zach, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00784389**Transaction ID : SB.192**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John James for Congress, Inc.

Mailing Address PO Box 628

City
Saint Clair ShoresState
MIZip Code
48080Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

James, John, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MI

District: 10

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00803502**Transaction ID : SB.201**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1213 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Kean for Congress

Mailing Address P.O. Box 999

City
EdisonState
NJZip Code
08818Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kean, Thomas, , , JrOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2	

FEC Identification Number

C C00703058**Transaction ID : SB.207**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kiggans for Congress

Mailing Address P.O. Box 5042

City
Virginia BeachState
VAZip Code
23471Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kiggans, Jennifer, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 02

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2	

FEC Identification Number

C C00776120**Transaction ID : SB.185**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kistner for CongressMailing Address 14870 Granada Ave.
Suite 1035City
Apple ValleyState
MNZip Code
55124Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Kistner, Tyler, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2	

FEC Identification Number

C C00732925**Transaction ID : SB.203**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1214 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Lori Chavez-DeRemer for Congress

Mailing Address 11805 SE Eastbourne Lane

City
Happy ValleyState
ORZip Code
97086Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Chavez-DeRemer, Lori, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: OR

District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

FEC Identification Number

C C00784520**Transaction ID : SB.215**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Matt Larkin for CongressMailing Address 4580 Klahanie Dr. SE
Unit 455City
SammamishState
WAZip Code
98029Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Larkin, Matt, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: WA

District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

FEC Identification Number

C C00780049**Transaction ID : SB.186**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Matt Larkin for CongressMailing Address 4580 Klahanie Dr. SE
Unit 455City
SammamishState
WAZip Code
98029Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Larkin, Matt, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA

District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

FEC Identification Number

C C00780049**Transaction ID : SB.187**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1215 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Mike Erickson for Congress

Mailing Address PO Box 23811

City
TigardState
ORZip Code
97281Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Erickson, Mike, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: OR

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00809178**Transaction ID : SB.216**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Erickson for Congress

Mailing Address PO Box 23811

City
TigardState
ORZip Code
97281Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Erickson, Mike, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: OR

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00809178**Transaction ID : SB.217**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Monica for Congress

Mailing Address 228 S Washington St

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

De la Cruz, Monica, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 15

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00765719**Transaction ID : SB.183**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1216 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Our Guy for Congress

Mailing Address PO Box 515

City
GlenmooreState
PAZip Code
19343Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Ciarrocchi, Guy, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00806398**Transaction ID : SB.219**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paul Junge for CongressMailing Address 17195 Silver Parkway
#408City
FentonState
MIZip Code
48430Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Junge, Paul, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MI

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00726687**Transaction ID : SB.199**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paul Junge for CongressMailing Address 17195 Silver Parkway
#408City
FentonState
MIZip Code
48430Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Junge, Paul, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: MI

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00726687**Transaction ID : SB.200**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1217 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Pekau for Congress

Mailing Address PO Box 2416

City
Orland ParkState
ILZip Code
60462Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Pekau, Keith, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00794479**Transaction ID : SB.193**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pekau for Congress

Mailing Address PO Box 2416

City
Orland ParkState
ILZip Code
60462Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Pekau, Keith, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00794479**Transaction ID : SB.194**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Regan4Congress

Mailing Address PO Box 343

City
DecaturState
ILZip Code
62525Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Deering, Regan, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00802355**Transaction ID : SB.195**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1218 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Robertson for CongressMailing Address 54 N. Pecos Road
Suite ACity
HendersonState
NVZip Code
89074Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Robertson, Mark, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

FEC Identification Number

C C00765891**Transaction ID : SB.209**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Scheller for Congress, Inc.

Mailing Address PO Box 3855

City
AllentownState
PAZip Code
18106Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Scheller, Lisa, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

FEC Identification Number

C C00722892**Transaction ID : SB.220**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Steve Chabot for Congress

Mailing Address 9856 Archer Ln

City
DublinState
OHZip Code
43017Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Chabot, Steve, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

FEC Identification Number

C C00301838**Transaction ID : SB.213**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1219 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Tom Barrett for Congress

Mailing Address PO Box 15221

City
LansingState
MIZip Code
48901Purpose of Disbursement
Contribution

011

Candidate Name

Barrett, Thomas, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00793976**Transaction ID : SB.198**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Van Orden for Congress

Mailing Address P.O. Box 565

City
Prairie du ChienState
WIZip Code
53821Purpose of Disbursement
Contribution

011

Candidate Name

Van Orden, Derrick, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify)

State: WI District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00742007**Transaction ID : SB.188**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Yvette for Congress

Mailing Address 1111 10th Street #404

City
AlamogordoState
NMZip Code
88310Purpose of Disbursement
Contribution

011

Candidate Name

Harrell, Stella, Yvette, ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: NM District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00655571**Transaction ID : SB.208**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1220 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Zinke for Congress

Mailing Address 3030 North Montana Ave

City
HelenaState
MTZip Code
59602Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Zinke, Ryan, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: MT

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C C00778159**Transaction ID : SB.204**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brandon for Congress NY22

Mailing Address 47 Flintlock Drive

City
ShirleyState
NYZip Code
11967Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Williams, Brandon, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 22

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C C00806307**Transaction ID : SB.225**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brandon for Congress NY22

Mailing Address 47 Flintlock Drive

City
ShirleyState
NYZip Code
11967Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Williams, Brandon, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 22

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C C00806307**Transaction ID : SB.227**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1221 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Lalota for Congress

Mailing Address PO Box 5744

City
HauppaugeState
NYZip Code
11788Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Lalota, Nick, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C C00806018**Transaction ID : SB.224**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lalota for Congress

Mailing Address PO Box 5744

City
HauppaugeState
NYZip Code
11788Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Lalota, Nick, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C C00806018**Transaction ID : SB.228**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Laurel Lee for Congress, Inc.

Mailing Address PO Box 2743

City
BrandonState
FLZip Code
33509Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Lee, Laurel, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: FL

District: 15

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C C00815373**Transaction ID : SB.222**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1222 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Laurel Lee for Congress, Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Mailing Address PO Box 2743

FEC Identification Number

C C00815373**Transaction ID : SB.223**

Amount of Each Disbursement this Period

5000.00

Primary debt

☐ Memo ItemCity
BrandonState
FLZip Code
33509Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Lee, Laurel, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 15

Full Name (Last, First, Middle Initial)

B. Lawler for Congress

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

Mailing Address PO Box 87

FEC Identification Number

C C00815415**Transaction ID : SB.226**

Amount of Each Disbursement this Period

5000.00

☐ Memo ItemCity
South SalemState
NYZip Code
10590Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Lawler, Michael, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 17

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

354892.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1223 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Convergence Media LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.19

Amount of Each Disbursement this Period

3.42

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DonorBureau

Mailing Address 1900 N Culpepper St

City
ArlingtonState
VAZip Code
22207Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.18

Amount of Each Disbursement this Period

16.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.1

Amount of Each Disbursement this Period

30.95

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.37

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1224 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.16

Amount of Each Disbursement this Period

146.35

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant fee

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.17

Amount of Each Disbursement this Period

25.21

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.13

Amount of Each Disbursement this Period

25.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

196.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1225 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Convergence Media LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.21

Amount of Each Disbursement this Period

0.14

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TMA Direct, Inc.Mailing Address 1900 Reston Metro Plaza
Suite 600City
RestonState
VAZip Code
20190Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.22

Amount of Each Disbursement this Period

23.50

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.2

Amount of Each Disbursement this Period

19.95

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.59

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1226 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.20

Amount of Each Disbursement this Period

228.83

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Moore, Calvin, , ,Mailing Address 1747 Pennsylvania Ave. NW
5th FloorCity
WashingtonState
DCZip Code
20006Purpose of Disbursement
Travel reimbursement - see memo entry

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.147

Amount of Each Disbursement this Period

1439.30

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Avis

Mailing Address 6 Sylvan Way

City
ParsippanyState
NJZip Code
07054Purpose of Disbursement
Ground transportation

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.149

Amount of Each Disbursement this Period

381.84

Non-contribution account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1668.13

	21b		22		23		26		27
	28a		28b		28c	x	29		30b

Congressional Leadership Fund

A. Four Seasons

002

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

C

963.16

X Memo Item

B. Convergence Media LLC

08 / 29 / 2022

003

Category/
Type

☐ Primary ☐ General
☐ Other (specify)

District:

C

50.87

Memo Item

C. DonorBureau

003

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

C

64.00

Memo Item

114.87

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1228 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Excelsior Strategies LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2022

FEC Identification Number

C

Transaction ID : SB.26

Amount of Each Disbursement this Period

12.25

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OnMessage Inc.

Mailing Address 705 Melvin Ave. #105

City
AnnapolisState
MDZip Code
21401Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2022

FEC Identification Number

C

Transaction ID : SB.126

Amount of Each Disbursement this Period

31064.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OnMessage Inc.

Mailing Address 705 Melvin Ave. #105

City
AnnapolisState
MDZip Code
21401Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2022

FEC Identification Number

C

Transaction ID : SB.87

Amount of Each Disbursement this Period

41666.66

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

72742.91

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1229 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. OnMessage Inc.

Mailing Address 705 Melvin Ave. #105

City
AnnapolisState
MDZip Code
21401Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB.88

Amount of Each Disbursement this Period

6500.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Oracle America, Inc.

Mailing Address 360 Park Avenue South

City
New YorkState
NYZip Code
10010Purpose of Disbursement
Media analytics

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB.95

Amount of Each Disbursement this Period

11286.41

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Oracle America, Inc.

Mailing Address 360 Park Avenue South

City
New YorkState
NYZip Code
10010Purpose of Disbursement
Media analytics

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB.96

Amount of Each Disbursement this Period

4063.11

Non-contribution account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

21849.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1230 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Reach Right Digital Marketing, LLCMailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.25

Amount of Each Disbursement this Period

1172.15

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Shiraz Media Corporation

Mailing Address 25 Little Bend

City
BarringtonState
ILZip Code
60010Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.28

Amount of Each Disbursement this Period

91.70

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.23

Amount of Each Disbursement this Period

920.91

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2184.76

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1231 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.3

Amount of Each Disbursement this Period

75.75

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Atwater-McLeod, Sally, , ,Mailing Address 1747 Pennsylvania Ave. NW
5th FloorCity
WashingtonState
DCZip Code
20006Purpose of Disbursement
Travel reimbursement - see memo entry

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.150

Amount of Each Disbursement this Period

709.66

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UberMailing Address 1455 Market St.
Suite 400City
San FranciscoState
CAZip Code
94103Purpose of Disbursement
Ground transportation

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.152

Amount of Each Disbursement this Period

90.16

Non-contribution account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

785.41

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1232 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 233 South Wacker Drive

City
ChicagoState
ILZip Code
60606Purpose of Disbursement
Airfare

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB.151

Amount of Each Disbursement this Period

518.10

Non-contribution account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Convergence Media LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB.33

Amount of Each Disbursement this Period

17.24

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Deep Root Analytics LLCMailing Address 1600 Wilson Blvd.
Suite 300City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Modeling

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB.101

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

47017.24

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1233 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Deep Root Analytics LLCMailing Address 1600 Wilson Blvd.
Suite 300City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0		2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.102

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Deep Root Analytics LLCMailing Address 1600 Wilson Blvd.
Suite 300City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0		2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.103

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. dmm Media, Inc.Mailing Address 1911 N. Fort Myer Drive
Suite 400City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0		2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.127

Amount of Each Disbursement this Period

9039.49

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

103039.49

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1234 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Excelsior Strategies LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2022

FEC Identification Number

C

Transaction ID : SB.34

Amount of Each Disbursement this Period

21.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Extreme Reach Inc.Mailing Address 75 Second Ave.
Suite 720City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Online shipping services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2022

FEC Identification Number

C

Transaction ID : SB.154

Amount of Each Disbursement this Period

240.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paragon Strategies LLCMailing Address 1465 Woodbury Ave.
PMB 234City
PortsmouthState
NHZip Code
03801Purpose of Disbursement
Research

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2022

FEC Identification Number

C

Transaction ID : SB.145

Amount of Each Disbursement this Period

30000.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30261.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1235 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Person 2 Person MessagingMailing Address 2800 S. Shirlington Road
9th FloorCity
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.30

Amount of Each Disbursement this Period

40.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pop Acta Media Inc.Mailing Address 10 Fairway Dr.
Suite 180VCity
Deerfield BeachState
FLZip Code
33441Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.35

Amount of Each Disbursement this Period

91.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Reach Right Digital Marketing, LLCMailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.32

Amount of Each Disbursement this Period

1927.82

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2058.82

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1236 OF 1424

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Red Fog Media LLC

Mailing Address 1209 Orange Street

City
Wilmington

State
DE

Zip Code
19801

Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

FEC Identification Number

C

Transaction ID : SB.37

Amount of Each Disbursement this Period

30.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Right Country Lists

Mailing Address 117 North Saint Asaph Street

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

FEC Identification Number

C

Transaction ID : SB.29

Amount of Each Disbursement this Period

472.20

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Shiraz Media Corporation

Mailing Address 25 Little Bend

City
Barrington

State
IL

Zip Code
60010

Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 30 / 2022

FEC Identification Number

C

Transaction ID : SB.31

Amount of Each Disbursement this Period

399.70

Non-contribution account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

901.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1237 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. The Tarrance GroupMailing Address 201 N. Union St.
Suite 410City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.128

Amount of Each Disbursement this Period

32000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Tarrance GroupMailing Address 201 N. Union St.
Suite 410City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.129

Amount of Each Disbursement this Period

32000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Tarrance GroupMailing Address 201 N. Union St.
Suite 410City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.130

Amount of Each Disbursement this Period

32000.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1238 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. The Tarrance GroupMailing Address 201 N. Union St.
Suite 410City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.131

Amount of Each Disbursement this Period

33000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.36

Amount of Each Disbursement this Period

787.20

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.4

Amount of Each Disbursement this Period

53.95

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

33841.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1239 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. American Viewpoint, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2022

Mailing Address 1199 North Lee Street
Suite 808City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.132

Amount of Each Disbursement this Period

27000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Viewpoint, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2022

Mailing Address 1199 North Lee Street
Suite 808City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.133

Amount of Each Disbursement this Period

1900.14

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2022

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.14

Amount of Each Disbursement this Period

5.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

28905.14

	21b		22		23		26		27
	28a		28b		28c	x	29		30b

Congressional Leadership Fund

District:

Memo Item

District:

Memo Item

District:

Memo Item

283.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1241 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Reach Right Digital Marketing, LLCMailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.45

Amount of Each Disbursement this Period

2325.17

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Right Country Lists

Mailing Address 117 North Saint Asaph Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.41

Amount of Each Disbursement this Period

856.35

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Shiraz Media Corporation

Mailing Address 25 Little Bend

City
BarringtonState
ILZip Code
60010Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.43

Amount of Each Disbursement this Period

144.90

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3326.42

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1242 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.38

Amount of Each Disbursement this Period

287.52

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.39

Amount of Each Disbursement this Period

1228.79

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.5

Amount of Each Disbursement this Period

72.90

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1589.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1243 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Advertising Analytics LLCMailing Address 1427 Leslie Avenue
Suite 108City
AlexandriaState
VAZip Code
22301Purpose of Disbursement
Data analytics

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2022

FEC Identification Number

C

Transaction ID : SB.97

Amount of Each Disbursement this Period

80000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2022

FEC Identification Number

C

Transaction ID : SB.15

Amount of Each Disbursement this Period

1.05

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Convergence Media LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2022

FEC Identification Number

C

Transaction ID : SB.49

Amount of Each Disbursement this Period

16.37

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

80017.42

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1244 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Paramount CommunicationMailing Address 525K East Market Street
#114City
LeesburgState
VAZip Code
20176Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.46

Amount of Each Disbursement this Period

405.60

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Reach Right Digital Marketing, LLCMailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.48

Amount of Each Disbursement this Period

364.22

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Right Country Lists

Mailing Address 117 North Saint Asaph Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.47

Amount of Each Disbursement this Period

568.70

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1338.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1245 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Strategic Advance Services, LLCMailing Address 611 Pennsylvania Ave. SE
Suite 267City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Travel and event services

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.153

Amount of Each Disbursement this Period

80617.91

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.50

Amount of Each Disbursement this Period

1285.42

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.6

Amount of Each Disbursement this Period

65.90

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

81969.23

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1246 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Basswood ResearchMailing Address 4550 Montgomery Ave.
Suite 906City
BethesdaState
MDZip Code
20814Purpose of Disbursement
Survey

005

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.134

Amount of Each Disbursement this Period

28850.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Basswood ResearchMailing Address 4550 Montgomery Ave.
Suite 906City
BethesdaState
MDZip Code
20814Purpose of Disbursement
Survey

005

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.136

Amount of Each Disbursement this Period

29600.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Basswood ResearchMailing Address 4550 Montgomery Ave.
Suite 906City
BethesdaState
MDZip Code
20814Purpose of Disbursement
Survey

005

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.137

Amount of Each Disbursement this Period

27600.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

86050.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1247 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Brandywine Public Affairs, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

Mailing Address 2201 Mill Road
Apt 214City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.89

Amount of Each Disbursement this Period

9375.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

Mailing Address 1593 Spring Hill Road
Suite 400City
Tysons CornerState
VAZip Code
22182Purpose of Disbursement
Donor database services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.98

Amount of Each Disbursement this Period

3800.85

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Convergence Media LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

Mailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.54

Amount of Each Disbursement this Period

9.75

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13185.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1248 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. First National Bank

Mailing Address P.O. Box 2557

City
OmahaState
NEZip Code
68103Purpose of Disbursement
Credit card payment - see memo entries

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.116

Amount of Each Disbursement this Period

3202.61

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 48hrprint.comMailing Address 6410 Eastland Rd.
Suite ECity
Brook ParkState
OHZip Code
44142Purpose of Disbursement
Printing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.117

Amount of Each Disbursement this Period

248.41

Non-contribution account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Cloudflare

Mailing Address 101 Townsend St

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Computer services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.124

Amount of Each Disbursement this Period

84.80

Non-contribution account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3202.61

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1249 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. GoDaddy.com

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2	

Mailing Address 14455 North Hayden Road
Suite 219City
ScottsdaleState
AZZip Code
85260Purpose of Disbursement
Domain name services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.118

Amount of Each Disbursement this Period

589.32

Non-contribution account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. KAZ Sushi

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2	

Mailing Address 1915 I St NW

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Event catering

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.123

Amount of Each Disbursement this Period

263.75

Non-contribution account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MailChimp

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2	

Mailing Address 675 Ponce De Leon Ave NE
#5000City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Email marketing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.119

Amount of Each Disbursement this Period

201.40

Non-contribution account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0										
---	---	---	--	--	--	--	--	--	--	--	--	--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1250 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Microsoft

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Computer services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.120

Amount of Each Disbursement this Period

315.03

Non-contribution account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Slack

Mailing Address 500 Howard Street

City
San FranciscoState
CAZip Code
94105Purpose of Disbursement
Computer services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.121

Amount of Each Disbursement this Period

119.57

Non-contribution account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. WP EngineMailing Address 504 Lavaca Street
Suite 1000City
AustinState
TXZip Code
78701Purpose of Disbursement
Computer services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.122

Amount of Each Disbursement this Period

898.15

Non-contribution account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1251 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Meeting Street Research, LLCMailing Address 962 Houston Northcutt Blvd.
Suite 201City
Mount PleasantState
SCZip Code
29464Purpose of Disbursement
Polling

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.141

Amount of Each Disbursement this Period

32000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OnMessage Inc.

Mailing Address 705 Melvin Ave. #105

City
AnnapolisState
MDZip Code
21401Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.90

Amount of Each Disbursement this Period

6500.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PCI Payment Solutions

Mailing Address 902 Chinquapin

City
McLeanState
VAZip Code
22102Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2022

FEC Identification Number

C

Transaction ID : SB.51

Amount of Each Disbursement this Period

50.50

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

38550.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1252 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Reach Right Digital Marketing, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Mailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Transaction ID : SB.53

Amount of Each Disbursement this Period

770.10

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Right Country Lists

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Mailing Address 117 North Saint Asaph Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Transaction ID : SB.52

Amount of Each Disbursement this Period

598.30

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Tarrance Group

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

Mailing Address 201 N. Union St.
Suite 410City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Transaction ID : SB.135

Amount of Each Disbursement this Period

16238.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

17606.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1253 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Trinity Financial Reporting & Compliance

Mailing Address PO Box 710993

City
HerndonState
VAZip Code
20171Purpose of Disbursement
Accounting and compliance

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.100

Amount of Each Disbursement this Period

20726.85

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.55

Amount of Each Disbursement this Period

936.32

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.7

Amount of Each Disbursement this Period

72.90

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

21736.07

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1254 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Ad Victoriam

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

Mailing Address 6525 Shiloh Rd.
Suite D-300City
AlpharettaState
GAZip Code
30005Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.57

Amount of Each Disbursement this Period

329.60

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. America Rising LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

Mailing Address 1555 Wilson Blvd.
Suite 307City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Research

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.146

Amount of Each Disbursement this Period

71500.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

Mailing Address 1593 Spring Hill Road
Suite 400City
Tysons CornerState
VAZip Code
22182Purpose of Disbursement
Donor database services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.99

Amount of Each Disbursement this Period

3500.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75329.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1255 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Convergence Media LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.63

Amount of Each Disbursement this Period

50.50

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Excelsior Strategies LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.58

Amount of Each Disbursement this Period

7.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Grassroots Targeting

Mailing Address 106 S. Columbus Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.104

Amount of Each Disbursement this Period

45300.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45357.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1256 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Grassroots Targeting

Mailing Address 106 S. Columbus Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.105

Amount of Each Disbursement this Period

37700.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Grassroots Targeting

Mailing Address 106 S. Columbus Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.106

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Grassroots Targeting

Mailing Address 106 S. Columbus Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.107

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

131700.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1257 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Grassroots Targeting

Mailing Address 106 S. Columbus Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.108

Amount of Each Disbursement this Period

31200.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Grassroots Targeting

Mailing Address 106 S. Columbus Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.109

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. North Star Opinion Research, Inc.

Mailing Address 112 North Alfred Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Survey

005

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.138

Amount of Each Disbursement this Period

40222.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

118422.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1258 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. O2M Digital, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

Mailing Address 539 W. Commerce St.
Unit 4240City
DallasState
TXZip Code
75208Purpose of Disbursement
Fundraising consulting refund

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.65

Amount of Each Disbursement this Period

- 58.50

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paramount Communication

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

Mailing Address 525K East Market Street
#114City
LeesburgState
VAZip Code
20176Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.60

Amount of Each Disbursement this Period

8.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pop Acta Media Inc.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

Mailing Address 10 Fairway Dr.
Suite 180VCity
Deerfield BeachState
FLZip Code
33441Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.56

Amount of Each Disbursement this Period

337.40

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2	8	6	.	9	0
---	---	---	---	---	---

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1259 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Reach Right Digital Marketing, LLCMailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.61

Amount of Each Disbursement this Period

208.82

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Reach Right Digital Marketing, LLCMailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.62

Amount of Each Disbursement this Period

225.25

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Red Elephant Strategy LLC

Mailing Address 2205 Main Line Blvd

City
AlexandriaState
VAZip Code
22301Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.91

Amount of Each Disbursement this Period

10000.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10434.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1260 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Red Fog Media LLC

Mailing Address 1209 Orange Street

City
WilmingtonState
DEZip Code
19801Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2022

FEC Identification Number

C

Transaction ID : SB.59

Amount of Each Disbursement this Period

10.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2022

FEC Identification Number

C

Transaction ID : SB.64

Amount of Each Disbursement this Period

1048.61

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2022

FEC Identification Number

C

Transaction ID : SB.8

Amount of Each Disbursement this Period

68.95

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1127.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1261 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Convergence Media LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.68

Amount of Each Disbursement this Period

12.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DonorBureau

Mailing Address 1900 N Culpepper St

City
ArlingtonState
VAZip Code
22207Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.67

Amount of Each Disbursement this Period

16.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pop Acta Media Inc.Mailing Address 10 Fairway Dr.
Suite 180VCity
Deerfield BeachState
FLZip Code
33441Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.66

Amount of Each Disbursement this Period

3.50

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1262 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Riverwood Strategies LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Mailing Address 2775 W. Navigator Drive
Suite 110City
MeridianState
IDZip Code
83642Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.92

Amount of Each Disbursement this Period

12000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Mailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.69

Amount of Each Disbursement this Period

254.04

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2022

Mailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.9

Amount of Each Disbursement this Period

43.90

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12297.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1263 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. American Viewpoint, Inc.Mailing Address 1199 North Lee Street
Suite 808City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Polling

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.142

Amount of Each Disbursement this Period

28800.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Convergence Media LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.73

Amount of Each Disbursement this Period

9.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Convert Digital LLC

Mailing Address 130 N Fayette Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Non-IE digital placement

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.115

Amount of Each Disbursement this Period

163141.24

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

191950.24

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1264 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Excelsior Strategies LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.72

Amount of Each Disbursement this Period

10.50

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pop Acta Media Inc.Mailing Address 10 Fairway Dr.
Suite 180VCity
Deerfield BeachState
FLZip Code
33441Purpose of Disbursement
Fundraising consulting refund

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.75

Amount of Each Disbursement this Period

- 4.20

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Reach Right Digital Marketing, LLCMailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.71

Amount of Each Disbursement this Period

42.50

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1265 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Red Fog Media LLC

Mailing Address 1209 Orange Street

City
WilmingtonState
DEZip Code
19801Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.70

Amount of Each Disbursement this Period

15.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Red Oak Strategic LLC

Mailing Address 312 Calvert Ave.

City
AlexandriaState
VAZip Code
22301Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.110

Amount of Each Disbursement this Period

92000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Right Country Lists

Mailing Address 117 North Saint Asaph Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting refund

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.76

Amount of Each Disbursement this Period

- 225.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91790.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1266 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.10

Amount of Each Disbursement this Period

84.90

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.74

Amount of Each Disbursement this Period

315.83

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.77

Amount of Each Disbursement this Period

473.97

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

874.70

TOTAL This Period (last page this line number only)..... ►

	21b		22		23		26		27
	28a		28b		28c	x	29		30b

Congressional Leadership Fund

Three examples of date labels are shown, separated by slashes. The first label shows 'M' and 'M' in the top row and '09' in the bottom row. The second label shows 'D' and 'D' in the top row and '09' in the bottom row. The third label shows 'Y', 'Y', 'Y', and 'Y' in the top row and '2022' in the bottom row.

Non-contribution account

Memo Item

Memo Item

358.19

FEC Schedule B (Form 3X) Rev. 05/2016

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1268 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. OnMessage Inc.

Mailing Address 705 Melvin Ave. #105

City
AnnapolisState
MDZip Code
21401Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	0			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.93

Amount of Each Disbursement this Period

25000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 1892, LLC

Mailing Address PO Box 1832

City
GallatinState
TNZip Code
37066Purpose of Disbursement
Polling

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.140

Amount of Each Disbursement this Period

14280.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Action NetworkMailing Address 1747 Pennsylvania Ave. NW
5th FloorCity
WashingtonState
DCZip Code
20006Purpose of Disbursement
In-kind: Data and research

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.157

Amount of Each Disbursement this Period

17559.34

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

56839.34

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1269 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Capitol Computer Exchange

Mailing Address 4487 Forbes Boulevard

City
LanhamState
MDZip Code
20706Purpose of Disbursement
Remote office services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.125

Amount of Each Disbursement this Period

3407.50

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cavalry LLC

Mailing Address 1634 Eye Street NW

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Pre-payment for future IE

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.234

Amount of Each Disbursement this Period

50000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Convergence Media LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.81

Amount of Each Disbursement this Period

18.78

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53426.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1270 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Cygnal LLCMailing Address 1600 K St. NW
Suite 350City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Polling

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.144

Amount of Each Disbursement this Period

7400.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Deep Root Analytics LLCMailing Address 1600 Wilson Blvd.
Suite 300City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.111

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Deep Root Analytics LLCMailing Address 1600 Wilson Blvd.
Suite 300City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.112

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

101400.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1271 OF 1424

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Deep Root Analytics LLC

Mailing Address 1600 Wilson Blvd.
Suite 300

City
Arlington

State
VA

Zip Code
22209

Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 12 / 2022

FEC Identification Number

C

Transaction ID : SB.113

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Deep Root Analytics LLC

Mailing Address 1600 Wilson Blvd.
Suite 300

City
Arlington

State
VA

Zip Code
22209

Purpose of Disbursement
Modeling

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 12 / 2022

FEC Identification Number

C

Transaction ID : SB.114

Amount of Each Disbursement this Period

47000.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. E.C. Maruggi Incorporated

Mailing Address 660 South Howell St.

City
St. Paul

State
MN

Zip Code
55116

Purpose of Disbursement
Administrative consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 12 / 2022

FEC Identification Number

C

Transaction ID : SB.94

Amount of Each Disbursement this Period

1000.00

Non-contribution account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

95000.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1272 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Excelsior Strategies LLCMailing Address 1010 N. Fairfax St.
Suite 250City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.84

Amount of Each Disbursement this Period

47.50

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Extreme Reach Inc.Mailing Address 75 Second Ave.
Suite 720City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Online shipping services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.155

Amount of Each Disbursement this Period

1007.15

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fabrizio, Lee & Associates LLC

Mailing Address 2624 NE 15th Street

City
Ft. LauderdaleState
FLZip Code
33304Purpose of Disbursement
Polling

005

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.139

Amount of Each Disbursement this Period

31700.00

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32754.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1273 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Public Opinion Strategies LLC

Mailing Address 214 N. Fayette Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Polling

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.143

Amount of Each Disbursement this Period

30500.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Reach Right Digital Marketing, LLCMailing Address 6501 Red Hook Plaza
Suite 201City
St. ThomasState
VIZip Code
00802Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.82

Amount of Each Disbursement this Period

21.64

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Red Fog Media LLC

Mailing Address 1209 Orange Street

City
WilmingtonState
DEZip Code
19801Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.80

Amount of Each Disbursement this Period

62.50

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

30584.14

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1274 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Shiraz Media Corporation

Mailing Address 25 Little Bend

City
BarringtonState
ILZip Code
60010Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2022

FEC Identification Number

C

Transaction ID : SB.85

Amount of Each Disbursement this Period

14.00

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TMA Direct, Inc.Mailing Address 1900 Reston Metro Plaza
Suite 600City
RestonState
VAZip Code
20190Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2022

FEC Identification Number

C

Transaction ID : SB.86

Amount of Each Disbursement this Period

28.20

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchandise fee

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2022

FEC Identification Number

C

Transaction ID : SB.12

Amount of Each Disbursement this Period

45.96

Non-contribution account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88.16

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1275 OF 1424

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.83

Amount of Each Disbursement this Period

429.21

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical ServicesMailing Address 1776 Wilson Blvd.
Suite 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Merchant Fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	2	2		

FEC Identification Number

C

Transaction ID : SB.83. B

Amount of Each Disbursement this Period

230.52

Non-contribution account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

659.73

TOTAL This Period (last page this line number only)..... ►

1841277.39

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1276 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany	State OH	Zip Code 43504	Amount 241919.83		
Purpose of Expenditure Media Placement		Category/ Type 004	Transaction ID : SE.001 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022		
Name of Federal Candidate: Engel, Kirsten, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought 241919.83			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Salt Lake City	State UT	Zip Code 84106	Amount 42000.00		
Purpose of Expenditure Digital Placement		Category/ Type 004	Transaction ID : SE.002 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022		
Name of Federal Candidate: Engel, Kirsten, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought 283919.83			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			283919.83		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1277 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Outlaw Media, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
Mailing Address 3532 Goddard Way			Amount 13000.00		
City Alexandria	State VA	Zip Code 22304	Transaction ID : SE.003		
Purpose of Expenditure Media Production		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2022		
Name of Federal Candidate: Engel, Kirsten, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Camelback Strategy Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2022		
Mailing Address 2801 E Camelback Rd Ste 200			Amount 50000.00		
City Phoenix	State AZ	Zip Code 85016	Transaction ID : SE.004		
Purpose of Expenditure Canvassing		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 25 / 2022		
Name of Federal Candidate: Gray, Adam, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			63000.00		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1278 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Camelback Strategy Group			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2022		
Mailing Address 2801 E Camelback Rd Ste 200			Amount 50000.00		
City Phoenix	State AZ	Zip Code 85016	Transaction ID : SE.005		
Purpose of Expenditure Canvassing		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2022		
Name of Federal Candidate: Duarte, John, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 125000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Swing Strategies			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2022		
Mailing Address 925 University Ave			Amount 2522.89		
City Sacramento	State CA	Zip Code 95825	Transaction ID : SE.006		
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2022		
Name of Federal Candidate: Gray, Adam, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 127522.89			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			52522.89		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1279 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on	
Full Name of Payee Swing Strategies <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2022	
Mailing Address 925 University Ave				Amount 2522.90	
City Sacramento		State CA		Zip Code 95825	
Purpose of Expenditure Direct Mail				Transaction ID : SE.007 Date of Disbursement or Obligation MM / DD / YYYY 08 / 25 / 2022	
Category/Type 004					
Name of Federal Candidate: Duarte, John, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 13 State: CA	
Calendar Year-To-Date Per Election for Office Sought 130045.79				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee OnMessage, Inc <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022	
Mailing Address 817 Slaters Lane				Amount 13000.00	
City Alexandria		State VA		Zip Code 22314	
Purpose of Expenditure Media Production				Transaction ID : SE.008 Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2022	
Category/Type 004					
Name of Federal Candidate: Gray, Adam, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 13 State: CA	
Calendar Year-To-Date Per Election for Office Sought 143045.79				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="border: 1px solid black; padding: 5px; width: 200px;"> <p>15522.90</p> </div> </div>					
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.					
Signature <u>Crosby, Caleb, , ,</u>				Date MM / DD / YYYY 09 / 22 / 2022	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1280 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Red Eagle Media Group			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Mailing Address 815 Slaters Lane			Amount 75000.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.009		
Purpose of Expenditure Digital Placement		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 31 / 2022		
Name of Federal Candidate: Gray, Adam, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Mailing Address PO Box 1051			Amount 215502.77		
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.010		
Purpose of Expenditure Media Placement		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022		
Name of Federal Candidate: Gray, Adam, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			290502.77		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 1281 OF 1424
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00504530</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee RumbleUp, LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 09 / 07 / 2022	
Mailing Address 2001 K St NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3500.00</div>	
City Washington	State DC	Zip Code 20006	Transaction ID : SE.011 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 09 / 07 / 2022	
Purpose of Expenditure Text Messages		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Gray, Adam, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">437048.56</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee FlexPoint Media INC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 09 / 14 / 2022	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">233992.48</div>	
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.012 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 09 / 09 / 2022	
Purpose of Expenditure Media Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: Gray, Adam, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">671041.04</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">237492.48</div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div>				
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			[Electronically Filed] Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1282 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Red Eagle Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
Mailing Address 815 Slaters Lane			Amount 75000.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.013		
Purpose of Expenditure Digital Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022		
Name of Federal Candidate: Gray, Adam, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 746041.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Camelback Strategy Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2022		
Mailing Address 2801 E Camelback Rd Ste 200			Amount 50000.00		
City Phoenix	State AZ	Zip Code 85016	Transaction ID : SE.014		
Purpose of Expenditure Canvassing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 25 / 2022		
Name of Federal Candidate: Salas, Rudy, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 50000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			125000.00		
(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.					
Crosby, Caleb, , , Signature			Date MM / DD / YYYY 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1283 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Camelback Strategy Group			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2022		
Mailing Address 2801 E Camelback Rd Ste 200			Amount 50000.00		
City Phoenix	State AZ	Zip Code 85016	Transaction ID : SE.015 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2022		
Purpose of Expenditure Canvassing		Category/ Type 004			
Name of Federal Candidate: Valadao, David, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 100000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Swing Strategies			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2022		
Mailing Address 925 University Ave			Amount 2522.89		
City Sacramento	State CA	Zip Code 95825	Transaction ID : SE.016 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2022		
Purpose of Expenditure Direct Mail		Category/ Type 004			
Name of Federal Candidate: Salas, Rudy, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 102522.89			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			52522.89		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1284 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Swing Strategies			<input type="checkbox"/> Memo Item		
Mailing Address 925 University Ave			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2022		
City Sacramento	State CA	Zip Code 95825	Amount 2522.90		
Purpose of Expenditure Direct Mail		Category/Type 004	Transaction ID : SE.017 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2022		
Name of Federal Candidate: Valadao, David, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 22 State: CA		
Calendar Year-To-Date Per Election for Office Sought			105045.79 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Red Eagle Media Group			<input type="checkbox"/> Memo Item		
Mailing Address 815 Slaters Lane			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Alexandria	State VA	Zip Code 22314	Amount 50000.00		
Purpose of Expenditure Digital Placement		Category/Type 004	Transaction ID : SE.018 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 31 / 2022		
Name of Federal Candidate: Salas, Rudy, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 22 State: CA		
Calendar Year-To-Date Per Election for Office Sought			155045.79 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			52522.90		
(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.					
Signature Crosby, Caleb, , ,			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1285 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City New Albany		State OH	Zip Code 43054		
Purpose of Expenditure Media Placement		Category/ Type		Amount 415529.27	
		004		Transaction ID : SE.019 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022	
Name of Federal Candidate: Salas, Rudy, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
570575.06					
Full Name of Payee Prime Media Partners, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 4201 Wilson Blvd. #110-126			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Arlington		State VA	Zip Code 22203		
Purpose of Expenditure Media Production		Category/ Type		Amount 13000.00	
		004		Transaction ID : SE.020 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022	
Name of Federal Candidate: Salas, Rudy, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
583575.06					
(a) SUBTOTAL of Itemized Independent Expenditures			▶ 428529.27		
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Washington		State DC	Amount 3300.00		
Zip Code 20006		Transaction ID : SE.021			
Purpose of Expenditure Text Messages		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022	
Name of Federal Candidate: Salas, Rudy, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			586875.06 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Prime Media Partners, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 4201 Wilson Blvd. #110-126			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Arlington		State VA	Amount 32500.00		
Zip Code 22203		Transaction ID : SE.022			
Purpose of Expenditure Media Production		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022	
Name of Federal Candidate: Salas, Rudy, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			619375.06 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			35800.00		
(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.					
Crosby, Caleb, , , Signature			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1287 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Zip Code 43504	Amount 412607.65	
Purpose of Expenditure Media Placement			Category/Type 004	Transaction ID : SE.023 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022	
Name of Federal Candidate: Salas, Rudy, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			1031982.71	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Red Eagle Media Group			<input type="checkbox"/> Memo Item		
Mailing Address 815 Slaters Lane			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Alexandria		State VA	Zip Code 22314	Amount 50000.00	
Purpose of Expenditure Digital Placement			Category/Type 004	Transaction ID : SE.024 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022	
Name of Federal Candidate: Salas, Rudy, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			1081982.71	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				462607.65	
(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.					
Signature <i>Crosby, Caleb, , ,</i>			[Electronically Filed]	Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Red Eagle Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 815 Slaters Lane			Amount 73000.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.025		
Purpose of Expenditure Digital Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2022		
Name of Federal Candidate: Smith, Christy, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>27</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 73000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address PO Box 1051			Amount 143336.08		
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.026		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022		
Name of Federal Candidate: Smith, Christy, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>27</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 216336.08			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			216336.08		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Prime Media Partners, LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 4201 Wilson Blvd. #110-126				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13000.00</div>	
City Arlington		State VA		Zip Code 22203	
Purpose of Expenditure Media Production				Transaction ID : SE.027 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>				<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Smith, Christy, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: <u>27</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">229336.08</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item RumbleUp, LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2001 K St NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5500.00</div>	
City Washington		State DC		Zip Code 20006	
Purpose of Expenditure Text Messages				Transaction ID : SE.028 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>				<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Smith, Christy, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: <u>27</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">234836.08</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">18500.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
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.					
Signature <u>Crosby, Caleb, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1290 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address PO Box 1051				Amount 160138.54	
City New Albany		State OH		Zip Code 43504	
Purpose of Expenditure Media Placement				Category/Type 004	
Name of Federal Candidate: Smith, Christy, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 27 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 394974.62				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media Group				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address 815 Slaters Lane				Amount 73000.00	
City Alexandria		State VA		Zip Code 22314	
Purpose of Expenditure Digital Placement				Category/Type 004	
Name of Federal Candidate: Smith, Christy, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 27 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 467974.62				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				233138.54	
(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.					
Signature <u>Crosby, Caleb, , ,</u>				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 75000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.031 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 01 / 2022
Name of Federal Candidate: Chen, Jay, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			75000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City New Albany		State OH	Zip Code 43054		Amount 251812.77
Purpose of Expenditure Media Placement			Category/ Type 004		Transaction ID : SE.032 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022
Name of Federal Candidate: Chen, Jay, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			326812.77		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				326812.77	
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Mailing Address 2001 K St NW			Amount 5300.00		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.033		
Purpose of Expenditure Text Messages		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: Chen, Jay, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 332112.77			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Strategic Partners & Media, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Mailing Address 1851A McGuckian Street			Amount 13000.00		
City Annapolis	State MD	Zip Code 21401	Transaction ID : SE.034		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: Chen, Jay, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 345112.77			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			18300.00		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1293 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Targeted Victory LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2311 Wilson Blvd Suite 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">100000.00</div>	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.035 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Steel, Michelle, , ,	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">445112.77</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 45 State: CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">264447.05</div>	
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.036 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Media Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Chen, Jay, , ,	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">709559.82</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 45 State: CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	364447.05
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

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M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1294 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 75000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.037 Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022
Name of Federal Candidate: Chen, Jay, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 45 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			784559.82		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2022		
Full Name of Payee Cavalry LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW #800			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City Washington		State DC	Zip Code 20006		Amount 75000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.038 Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2022
Name of Federal Candidate: Porter, Katherine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 47 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			75000.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2022		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 150000.00 </div> </div>					
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			Date MM / DD / YYYY 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1295 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address PO Box 1051					<div style="display: flex; justify-content: space-between;"> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>
City New Albany		State OH	Zip Code 43054	Amount 176380.94	
Purpose of Expenditure Media Placement			Category/Type 004		Transaction ID : SE.039
Name of Federal Candidate: Porter, Katherine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Date of Disbursement or Obligation
Calendar Year-To-Date Per Election for Office Sought			251380.94		<div style="display: flex; justify-content: space-between;"> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>
Name of Federal Candidate: Porter, Katherine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
					District: 47 State: CA
Calendar Year-To-Date Per Election for Office Sought			251380.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Patchwork Creative			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1320 N Courthouse Rd. Suite 130					<div style="display: flex; justify-content: space-between;"> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>
City Arlington		State VA	Zip Code 22201	Amount 13000.00	
Purpose of Expenditure Media Production			Category/Type 004		Transaction ID : SE.040
Name of Federal Candidate: Porter, Katherine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Date of Disbursement or Obligation
Calendar Year-To-Date Per Election for Office Sought			264380.94		<div style="display: flex; justify-content: space-between;"> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>
Name of Federal Candidate: Porter, Katherine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
					District: 47 State: CA
Calendar Year-To-Date Per Election for Office Sought			264380.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				189380.94	
(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.					
Signature Crosby, Caleb, , ,			[Electronically Filed]		Date
					<div style="display: flex; justify-content: space-between;"> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 30px; height: 20px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> <div><input style="width: 40px; height: 20px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1296 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item RumbleUp, LLC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 09 / 07 / 2022 </div>	
Mailing Address 2001 K St NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5700.00 </div>	
City Washington	State DC	Zip Code 20006		
Purpose of Expenditure Text Messages		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Porter, Katherine, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 47 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 270080.94			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 09 / 14 / 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 188488.79 </div>	
City New Albany	State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Porter, Katie, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 47 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 458569.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	194188.79
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

MM / DD / YYYY
09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1297 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Cavalry LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Washington		State DC	Zip Code 20006	Amount 75000.00	
Purpose of Expenditure Digital Placement		Category/Type 004	Transaction ID : SE.043 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Name of Federal Candidate: Porter, Katherine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 47 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			533569.73		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022			<input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Zip Code 43504	Amount 299596.41	
Purpose of Expenditure Media Placement		Category/Type 004	Transaction ID : SE.044 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022		
Name of Federal Candidate: Levin, Mike, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 49 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			334596.41		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022			<input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				374596.41	
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1298 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Red Eagle Media Group <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022	
Mailing Address 815 Slaters Lane		Amount 75000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.045
Purpose of Expenditure Digital Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022
Name of Federal Candidate: Levin, Mike, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 49 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 409596.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Big Dog Strategies, LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 30 / 2022	
Mailing Address 23150 Fashion Dr Ste 231		Amount 56694.54	
City Estero	State FL	Zip Code 33928	Transaction ID : SE.046
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2022
Name of Federal Candidate: Caraveo, Yadira, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 81694.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		131694.54	
(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.			
Crosby, Caleb, , , Signature		Date MM / DD / YYYY 09 / 22 / 2022	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1299 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2022	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">787.50</div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Production		Category/Type 004	Transaction ID : SE.047 Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2022	
Name of Federal Candidate: Caraveo, Yadira, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 82482.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2022	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7500.00</div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Placement		Category/Type 004	Transaction ID : SE.048 Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2022	
Name of Federal Candidate: Caraveo, Yadira, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 89982.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	8287.50
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

MM / DD / YYYY
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1300 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2022		
City Washington		State DC	Amount 8100.00		
Purpose of Expenditure Text Messages		Zip Code 20006	Transaction ID : SE.049 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 01 / 2022		
Category/Type 004					
Name of Federal Candidate: Caraveo, Yadira, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 98082.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Big Dog Strategies, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 23150 Fashion Dr Ste 231			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 02 / 2022		
City Estero		State FL	Amount 46108.56		
Purpose of Expenditure Direct Mail		Zip Code 33928	Transaction ID : SE.050 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022		
Category/Type 004					
Name of Federal Candidate: Caraveo, Yadira, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 144190.60			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			54208.56		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Big Dog Strategies, LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2022	
Mailing Address 23150 Fashion Dr Ste 231				Amount 46108.56	
City Estero		State FL	Zip Code 33928	Transaction ID : SE.051 Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022	
Purpose of Expenditure Direct Mail			Category/ Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Caraveo, Yadira, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 190299.16				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Big Dog Strategies, LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2022	
Mailing Address 23150 Fashion Dr Ste 231				Amount 46108.56	
City Estero		State FL	Zip Code 33928	Transaction ID : SE.052 Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2022	
Purpose of Expenditure Direct Mail			Category/ Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Caraveo, Yadira, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 236407.72				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				92217.12	
(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.					
Crosby, Caleb, , , [Electronically Filed]				Date MM / DD / YYYY 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">564244.62</div>		
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.053 Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure Media Placement		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	MM / DD / YYYY		
Name of Federal Candidate: Caraveo, Yadira, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: CO		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">800652.34</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">67500.00</div>		
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.054 Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure Digital Placement		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	MM / DD / YYYY		
Name of Federal Candidate: Caraveo, Yadira, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: CO		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">868152.34</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">631744.62</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
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.					
Signature <u>Crosby, Caleb, , ,</u>			Date MM / DD / YYYY		
[Electronically Filed]			09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1303 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee WestGate Strategies			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 51			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 31 / 2022		
City Mount Vernon		State VA	Zip Code 22121	Amount 11257.66	
Purpose of Expenditure Media Production		Category/Type 004	Transaction ID : SE.055 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2022		
Name of Federal Candidate: Hayes, Jahana, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought			11257.66		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022			<input type="checkbox"/> Other (specify) ▶		
Full Name of Payee WestGate Strategies			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 51			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 31 / 2022		
City Mount Vernon		State VA	Zip Code 22121	Amount 22351.34	
Purpose of Expenditure Media Production		Category/Type 004	Transaction ID : SE.056 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2022		
Name of Federal Candidate: Hayes, Jahana, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought			33609.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022			<input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <p>33609.00</p> <p></p> <p></p> </div> </div>					
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			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1304 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee WestGate Strategies <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 31 / 2022	
Mailing Address PO Box 51		Amount 11644.10	
City Mount Vernon	State VA	Zip Code 22121	Transaction ID : SE.057
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2022
Name of Federal Candidate: Logan, George, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT
Calendar Year-To-Date Per Election for Office Sought 45253.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Arena LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 31 / 2022	
Mailing Address 1260 Stringham Ave #350		Amount 22000.00	
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.058
Purpose of Expenditure Digital Placement		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 30 / 2022
Name of Federal Candidate: Logan, George, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT
Calendar Year-To-Date Per Election for Office Sought 67253.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		33644.10	
(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.			
Crosby, Caleb, , , Signature		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1305 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 31 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 22000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.059 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 30 / 2022
Name of Federal Candidate: Hayes, Jahana, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT
Calendar Year-To-Date Per Election for Office Sought			89253.10		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2022		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 31 / 2022		
City New Albany		State OH	Zip Code 43054		Amount 145046.62
Purpose of Expenditure Media Placement			Category/ Type 004		Transaction ID : SE.060 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 30 / 2022
Name of Federal Candidate: Logan, George, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT
Calendar Year-To-Date Per Election for Office Sought			234299.72		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2022		
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="border: 1px solid black; padding: 5px; text-align: right;">167046.62</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(b) SUBTOTAL of Unitemized Independent Expenditures.....</div> <div style="border: 1px solid black; padding: 5px; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(c) TOTAL Independent Expenditures</div> <div style="border: 1px solid black; padding: 5px; text-align: right;"> </div> </div>					
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			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1306 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div><input style="width: 30px; border: 1px solid black;" type="text" value="MM"/> <input style="width: 30px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; border: 1px solid black;" type="text" value="DD"/> <input style="width: 30px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div><input style="width: 30px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>	
Mailing Address PO Box 1051				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">145046.63</div>	
City New Albany		State OH		Zip Code 43054	
Purpose of Expenditure Media Placement				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Hayes, Jahana, , , <div style="display: flex; justify-content: flex-end; align-items: center;"> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div>				Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">379346.35</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item RumbleUp, LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div><input style="width: 30px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>	
Mailing Address 2001 K St NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3500.00</div>	
City Washington		State DC		Zip Code 20006	
Purpose of Expenditure Text Messages				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Hayes, Jahana, , , <div style="display: flex; justify-content: flex-end; align-items: center;"> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div>				Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">382846.35</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">148546.63</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(c) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
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.					
Signature <u>Crosby, Caleb, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div><input style="width: 30px; border: 1px solid black;" type="text" value="MM"/></div> <div><input style="width: 30px; border: 1px solid black;" type="text" value="DD"/></div> <div><input style="width: 40px; border: 1px solid black;" type="text" value="YYYY"/></div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1307 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 2001 K St NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">08</div></div> <div><div style="border: 1px solid black; padding: 2px;">31</div></div> <div><div style="border: 1px solid black; padding: 2px;">2022</div></div> </div>
City Washington		State DC	Zip Code 20006		Amount 3500.00
Purpose of Expenditure Text Messages			Category/ Type 004		Transaction ID : SE.063
Name of Federal Candidate: Logan, George, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Date of Disbursement or Obligation
Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">08</div></div> <div><div style="border: 1px solid black; padding: 2px;">31</div></div> <div><div style="border: 1px solid black; padding: 2px;">2022</div></div> </div>
Calendar Year-To-Date Per Election for Office Sought			386346.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Arena			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1260 Stringham Ave #350			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">09</div></div> <div><div style="border: 1px solid black; padding: 2px;">06</div></div> <div><div style="border: 1px solid black; padding: 2px;">2022</div></div> </div>
City Salt Lake City		State UT	Zip Code 84106		Amount 10805.59
Purpose of Expenditure Direct Mail			Category/ Type 004		Transaction ID : SE.064
Name of Federal Candidate: Hayes, Jahana, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Date of Disbursement or Obligation
Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">08</div></div> <div><div style="border: 1px solid black; padding: 2px;">29</div></div> <div><div style="border: 1px solid black; padding: 2px;">2022</div></div> </div>
Calendar Year-To-Date Per Election for Office Sought			397151.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures ▶					14305.59
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div> <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">09</div></div> <div><div style="border: 1px solid black; padding: 2px;">22</div></div> <div><div style="border: 1px solid black; padding: 2px;">2022</div></div> </div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1308 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item WestGate Strategies		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 07 / 2022</div> </div>	
Mailing Address PO Box 51		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12423.08</div>	
City Mount Vernon	State VA	Zip Code 22121	Transaction ID : SE.065 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 08 / 31 / 2022</div> </div>
Purpose of Expenditure Media Production		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Hayes, Jahana, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">409575.02</div>			
Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 07 / 2022</div> </div>	
Mailing Address PO Box 1051		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">154321.63</div>	
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.066 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 02 / 2022</div> </div>
Purpose of Expenditure Media Placement		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Hayes, Jahana, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">563896.65</div>			
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">166744.71</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
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.			
Signature Crosby, Caleb, , ,		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 22 / 2022</div> </div>	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City New Albany		State OH	Zip Code 43054		
Purpose of Expenditure Media Placement		Category/ Type		Amount 154321.62	
		004		Transaction ID : SE.067 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022	
Name of Federal Candidate: Logan, George, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
718218.27					
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Salt Lake City		State UT	Zip Code 84106		
Purpose of Expenditure Digital Placement		Category/ Type		Amount 22000.00	
		004		Transaction ID : SE.068 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022	
Name of Federal Candidate: Hayes, Jahana, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
740218.27					
(a) SUBTOTAL of Itemized Independent Expenditures			▶ 176321.62		
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Arena LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022	
Mailing Address 1260 Stringham Ave #350				Amount 22000.00	
City Salt Lake City		State UT	Zip Code 84106	Transaction ID : SE.069 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022	
Purpose of Expenditure Digital Placement			Category/Type 004		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Logan, George, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President District: 05 State: CT <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought 762218.27				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Arena				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 09 / 2022	
Mailing Address 1260 Stringham Ave #350				Amount 10805.59	
City Salt Lake City		State UT	Zip Code 84106	Transaction ID : SE.070 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 30 / 2022	
Purpose of Expenditure Direct Mail			Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Hayes, Jahana, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President District: 05 State: CT <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought 773023.86				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				32805.59	
(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.					
Signature <u>Crosby, Caleb, , ,</u> [Electronically Filed]				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1311 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2022		
City Washington	State DC	Zip Code 20006	Amount 2850.00		
Purpose of Expenditure Text Messages		Category/ Type 004	Transaction ID : SE.071 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022		
Name of Federal Candidate: Hayes, Jahana, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT		
Calendar Year-To-Date Per Election for Office Sought 775873.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2022		
City Washington	State DC	Zip Code 20006	Amount 2850.00		
Purpose of Expenditure Text Messages		Category/ Type 004	Transaction ID : SE.072 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022		
Name of Federal Candidate: Logan, George, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT		
Calendar Year-To-Date Per Election for Office Sought 778723.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			5700.00		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item WestGate Strategies				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address PO Box 51				Amount 12003.88	
City Mount Vernon		State VA		Zip Code 22121	
Purpose of Expenditure Media Production				Category/Type 004	
Name of Federal Candidate: Hayes, Jahana, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought 790727.74				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address PO Box 1051				Amount 151307.25	
City New Albany		State OH		Zip Code 43504	
Purpose of Expenditure Media Placement				Category/Type 004	
Name of Federal Candidate: Hayes, Jahana, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought 942034.99				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				163311.13	
(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.					
Crosby, Caleb, , , Signature				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Zip Code 43504		Amount 151307.25
Purpose of Expenditure Media Placement			Category/Type 004		Transaction ID : SE.075 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022
Name of Federal Candidate: Logan, George, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought 1093342.24			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 22000.00
Purpose of Expenditure Digital Placement			Category/Type 004		Transaction ID : SE.076 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022
Name of Federal Candidate: Hayes, Jahana, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought 1115342.24			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			173307.25		
(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.					
Signature <i>Crosby, Caleb, , ,</i>			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 22000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.077 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022
Name of Federal Candidate: Logan, George, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT
Calendar Year-To-Date Per Election for Office Sought			1137342.24		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2022		
Full Name of Payee Arena			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 15 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 10805.59
Purpose of Expenditure Direct Mail			Category/ Type 004		Transaction ID : SE.078 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022
Name of Federal Candidate: Hayes, Jahana, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT
Calendar Year-To-Date Per Election for Office Sought			1148147.83		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2022		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 32805.59 </div> </div>					
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			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Arena <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 21 / 2022		
Mailing Address 1260 Stringham Ave #350			Amount 10805.59		
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.079		
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022		
Name of Federal Candidate: Hayes, Jahana, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT		
Calendar Year-To-Date Per Election for Office Sought 1158953.42			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Arena <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 26 / 2022		
Mailing Address 1260 Stringham Ave #350			Amount 5402.79		
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.080		
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Name of Federal Candidate: Logan, George, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT		
Calendar Year-To-Date Per Election for Office Sought 1164356.21			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			16208.38		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1316 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Arena			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 26 / 2022		
Mailing Address 1260 Stringham Ave #350			Amount 5402.80		
City Salt Lake City		State UT	Zip Code 84106		Transaction ID : SE.081
Purpose of Expenditure Direct Mail		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022	
Name of Federal Candidate: Hayes, Jahana, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CT		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
Mailing Address PO Box 1051			Amount 189836.06		
City New Albany		State OH	Zip Code 43504		Transaction ID : SE.082
Purpose of Expenditure Media Placement		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022	
Name of Federal Candidate: Mathis, Liz, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			195238.86		
(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.					
Crosby, Caleb, , , Signature			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1317 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Arena LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address 1260 Stringham Ave #350				Amount 30000.00	
City Salt Lake City		State UT	Zip Code 84106	Transaction ID : SE.083 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022	
Purpose of Expenditure Digital Placement			Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Mathis, Liz, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought 269836.06				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Outlaw Media, LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address 3532 Goddard Way				Amount 13000.00	
City Alexandria		State VA	Zip Code 22304	Transaction ID : SE.084 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022	
Purpose of Expenditure Media Production			Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Mathis, Liz, , , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought 282836.06				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				43000.00	
(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.					
Signature <u>Crosby, Caleb, , ,</u>				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1318 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>09 / 14 / 2022</div> </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">297662.58</div> Transaction ID : SE.085 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>09 / 09 / 2022</div> </div>	
City New Albany	State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: <input type="checkbox"/> Support Sorensen, Eric, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">297662.58</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>09 / 14 / 2022</div> </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">45000.00</div> Transaction ID : SE.086 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>09 / 11 / 2022</div> </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: <input type="checkbox"/> Support Sorensen, Eric, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">342662.58</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">342662.58</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1319 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Blitz Canvassing LLC			<input type="checkbox"/> Memo Item		
Mailing Address 7600 E Eastman Ave #405			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 02 / 2022		
City Denver		State CO	Zip Code 80231		
Purpose of Expenditure Canvassing		Category/ Type 004		Amount 50000.00	
Name of Federal Candidate: Mrvan, Frank, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 432000.00			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Blitz Canvassing LLC			<input type="checkbox"/> Memo Item		
Mailing Address 7600 E Eastman Ave #405			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 02 / 2022		
City Denver		State CO	Zip Code 80231		
Purpose of Expenditure Canvassing		Category/ Type 004		Amount 50000.00	
Name of Federal Candidate: Green, Jennifer-Ruth, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 482000.00			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> 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.					
Signature <u>Crosby, Caleb, , ,</u>			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1320 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y											
Full Name of Payee <input type="checkbox"/> Memo Item Big Dog Strategies, LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 02 / 2022							
Mailing Address 23150 Fashion Dr Ste 231				Amount 3570.00							
City Estero		State FL		Zip Code 33928							
Purpose of Expenditure Direct Mail				Category/Type 004							
Name of Federal Candidate: Green, Jennifer-Ruth, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN							
Calendar Year-To-Date Per Election for Office Sought 485570.00				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item Big Dog Strategies, LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 02 / 2022							
Mailing Address 23150 Fashion Dr Ste 231				Amount 3570.00							
City Estero		State FL		Zip Code 33928							
Purpose of Expenditure Direct Mail				Category/Type 004							
Name of Federal Candidate: Mrvan, Frank, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN							
Calendar Year-To-Date Per Election for Office Sought 489140.00				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶							
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 40%; text-align: right;">▶ 7140.00</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ </td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: right;">▶ </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶ 7140.00	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ 	(c) TOTAL Independent Expenditures	▶
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 7140.00										
(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.											
Signature <u>Crosby, Caleb, , ,</u>				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022							

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1321 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 03 / 2022		
City New Albany	State OH	Zip Code 43054	Amount 27825.00		
Purpose of Expenditure Media Placement		Category/Type 004	Transaction ID : SE.091 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 30 / 2022		
Name of Federal Candidate: Mrvan, Frank, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought 516965.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 03 / 2022		
City Washington	State DC	Zip Code 20006	Amount 6000.00		
Purpose of Expenditure Text Messages		Category/Type 004	Transaction ID : SE.092 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022		
Name of Federal Candidate: Mrvan, Frank, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought 522965.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			33825.00		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1322 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item The Hereford Agency				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 03 / 2022	
Mailing Address 5301 Burke Dr				Amount 18000.00	
City Alexandria		State VA		Zip Code 22309	
Purpose of Expenditure Media Production				Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Mrvan, Frank, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: IN	
Calendar Year-To-Date Per Election for Office Sought 540965.00				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Big Dog Strategies, LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2022	
Mailing Address 23150 Fashion Dr Ste 231				Amount 53778.60	
City Estero		State FL		Zip Code 33928	
Purpose of Expenditure Direct Mail				Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Mrvan, Frank, , ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: IN	
Calendar Year-To-Date Per Election for Office Sought 594743.60				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				71778.60	
(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.					
Signature <u>Crosby, Caleb, , ,</u>				Date MM / DD / YYYY 09 / 22 / 2022	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1323 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2022		
City New Albany	State OH	Zip Code 43504	Amount 466068.75		
Purpose of Expenditure Media Placement		Category/Type 004	Transaction ID : SE.095 Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022		
Name of Federal Candidate: Mrvan, Frank, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>		
Calendar Year-To-Date Per Election for Office Sought 1060812.35			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Targeted Victory LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2311 Wilson Blvd Suite 200			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2022		
City Arlington	State VA	Zip Code 22201	Amount 50000.00		
Purpose of Expenditure Digital Placement		Category/Type 004	Transaction ID : SE.096 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022		
Name of Federal Candidate: Green, Jennifer-Ruth, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>		
Calendar Year-To-Date Per Election for Office Sought 1110812.35			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			516068.75		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1324 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Flexpoint Media Inc			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address PO Box 1051			Amount 90000.00		
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.097		
Purpose of Expenditure Digital Placement		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Name of Federal Candidate: Mrvan, Frank, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate	District: <u>01</u> State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought			1254590.44		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2022 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Targeted Victory LLC			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 26 / 2022	
Mailing Address 2311 Wilson Blvd Suite 200			Amount 50000.00		
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.098		
Purpose of Expenditure Digital Placement		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 26 / 2022		
Name of Federal Candidate: Adkins, Amanda, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate	District: <u>03</u> State: <u>KS</u>
Calendar Year-To-Date Per Election for Office Sought			150000.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2022 <input type="checkbox"/> Other (specify) ▶		

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 140000.00

(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1325 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee DMM Media			<input type="checkbox"/> Memo Item		
Mailing Address 8588 Richmond Highway Ste 90546			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Alexandria		State VA	Zip Code 22309		Amount 13000.00
Purpose of Expenditure Media Production			Category/ Type 004		Transaction ID : SE.099 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022
Name of Federal Candidate: Davids, Sharice, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>KS</u>		
Calendar Year-To-Date Per Election for Office Sought			163000.00 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Zip Code 43504		Amount 410632.08
Purpose of Expenditure Media Placement			Category/ Type 004		Transaction ID : SE.100 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022
Name of Federal Candidate: Davids, Sharice, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>KS</u>		
Calendar Year-To-Date Per Election for Office Sought			573632.08 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				423632.08	
(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.					
Crosby, Caleb, , , Signature			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1326 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 1051				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">43000.00</div>	
City New Albany		State OH		Zip Code 43054	
Purpose of Expenditure Digital Placement				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Dauids, Sharice, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">616632.08</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 1051				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">360797.50</div>	
City New Albany		State OH		Zip Code 43054	
Purpose of Expenditure Media Placement				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Golden, Jared, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1178850.00</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">403797.50</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(c) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
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.					
Signature <u>Crosby, Caleb, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1327 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 1051				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">67000.00</div>	
City New Albany		State OH		Zip Code 43054	
Purpose of Expenditure Digital Placement				Transaction ID : SE.103 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>				<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Golden, Jared, ,				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1245850.00</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item RumbleUp, LLC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2001 K St NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3500.00</div>	
City Washington		State DC		Zip Code 20006	
Purpose of Expenditure Text Messages				Transaction ID : SE.104 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>				<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Golden, Jared, ,				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1249350.00</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">70500.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
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.					
Signature <u>Crosby, Caleb, ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1328 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Hereford Agency <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2022	
Mailing Address 5301 Burke Dr		Amount 13000.00	
City Alexandria	State VA	Zip Code 22309	Transaction ID : SE.105
Purpose of Expenditure Media Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022
Name of Federal Candidate: Golden, Jared, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 1262350.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Red Maverick Media <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 02 / 2022	
Mailing Address 1426 N 3rd St Suite 310		Amount 14022.00	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : SE.106
Purpose of Expenditure Direct Mail		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 30 / 2022
Name of Federal Candidate: Poliquin, Bruce, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 1276372.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		27022.00	
(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.			
Crosby, Caleb, , , Signature		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1329 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Red Maverick Media			<input type="checkbox"/> Memo Item		
Mailing Address 1426 N 3rd St Suite 310			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 02 / 2022		
City Harrisburg		State PA	Zip Code 17102		
Purpose of Expenditure Direct Mail		Category/ Type 004		Amount 14022.00	
Name of Federal Candidate: Golden, Jared, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1290394.00			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City New Albany		State OH	Zip Code 43054		
Purpose of Expenditure Media Placement		Category/ Type 004		Amount 360797.50	
Name of Federal Candidate: Golden, Jared, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1651191.50			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				374819.50	
(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.					
Signature <u>Crosby, Caleb, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1330 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 300.00 </div> Transaction ID : SE.109 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 06 / 2022 </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Production		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Golden, Jared, , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 1651491.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 67000.00 </div> Transaction ID : SE.110 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 06 / 2022 </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Golden, Jared, , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 1718491.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	67300.00
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1331 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee The Hereford Agency			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 11 / 2022		
Mailing Address 5301 Burke Dr			Amount 13000.00		
City Alexandria	State VA	Zip Code 22309	Transaction ID : SE.111 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 10 / 2022		
Purpose of Expenditure Media Production		Category/ Type 004			
Name of Federal Candidate: Golden, Jared, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ME</u> <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1731491.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Flexpoint Media Inc			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 11 / 2022		
Mailing Address PO Box 1051			Amount 4850.00		
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.112 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022		
Purpose of Expenditure Digital Production		Category/ Type 004			
Name of Federal Candidate: Golden, Jared, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ME</u> <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1736341.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			17850.00		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1332 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 14 / 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 360797.50 </div> Transaction ID : SE.113 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 09 / 2022 </div>	
City New Albany	State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Golden, Jared, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 2097439.00 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 14 / 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 67000.00 </div> Transaction ID : SE.114 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 11 / 2022 </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Golden, Jared, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought 2164439.00 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	427797.50
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1333 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Flexpoint Media Inc			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City New Albany		State OH	Zip Code 43054		
Purpose of Expenditure Digital Placement		Category/ Type 004		Amount 42000.00	
Name of Federal Candidate: Scholten, Hillary, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 42000.00			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City New Albany		State OH	Zip Code 43054		
Purpose of Expenditure Media Placement		Category/ Type 004		Amount 188885.38	
Name of Federal Candidate: Scholten, Hillary, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 230885.38			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			230885.38		
(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.					
Signature <u>Crosby, Caleb, , ,</u> _____			Date MM / DD / YYYY 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1334 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Outlaw Media, LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 09 07 2022 </div>	
Mailing Address 3532 Goddard Way			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 13000.00 </div> Transaction ID : SE.117 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 09 02 2022 </div>	
City Alexandria	State VA	Zip Code 22304		
Purpose of Expenditure Media Production		Category/ Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Scholten, Hillary, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought 243885.38			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 09 07 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 450.00 </div> Transaction ID : SE.118 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 09 06 2022 </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Production		Category/ Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Scholten, Hillary, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought 244335.38			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	13450.00
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
09
22
2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1335 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Washington		State DC	Amount 6500.00		
Zip Code 20006		Transaction ID : SE.119			
Purpose of Expenditure Text Messages		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022	
Name of Federal Candidate: Scholten, Hillary, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 250835.38			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Amount 189103.34		
Zip Code 43504		Transaction ID : SE.120			
Purpose of Expenditure Media Placement		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022	
Name of Federal Candidate: Scholten, Hillary, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 439938.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			195603.34		
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1336 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Flexpoint Media Inc			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
City New Albany	State OH	Zip Code 43054	Amount 42000.00		
Purpose of Expenditure Digital Placement		Category/ Type 004	Transaction ID : SE.121 Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022		
Name of Federal Candidate: Scholten, Hillary, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 481938.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Outlaw Media, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 3532 Goddard Way			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 19 / 2022		
City Alexandria	State VA	Zip Code 22304	Amount 13000.00		
Purpose of Expenditure Media Production		Category/ Type 004	Transaction ID : SE.122 Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2022		
Name of Federal Candidate: Scholten, Hillary, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 494938.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			55000.00		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1337 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on MM / DD / YYYY	
Full Name of Payee OnMessage, Inc <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2022	
Mailing Address 817 Slaters Lane			Amount 13000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.123 Date of Disbursement or Obligation MM / DD / YYYY 08 / 26 / 2022	
Purpose of Expenditure Media Production		Category/ Type 004		
Name of Federal Candidate: Slotkin, Elissa, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought 163000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee FlexPoint Media INC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2022	
Mailing Address PO Box 1051			Amount 172264.58	
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.124 Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2022	
Purpose of Expenditure Media Placement		Category/ Type 004		
Name of Federal Candidate: Slotkin, Elissa, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought 335264.58			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			185264.58	
(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.				
Signature <u>Crosby, Caleb, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1338 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 23000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.125 Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2022
Name of Federal Candidate: Slotkin, Elissa, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought			358264.58 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2022		
City Washington		State DC	Zip Code 20006		Amount 9500.00
Purpose of Expenditure Text Messages			Category/ Type 004		Transaction ID : SE.126 Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2022
Name of Federal Candidate: Slotkin, Elissa, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought			367764.58 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				32500.00	
(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.					
Crosby, Caleb, , , Signature			Date MM / DD / YYYY 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1339 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City New Albany		State OH	Zip Code 43054		
Purpose of Expenditure Media Placement		Category/ Type 004		Amount 176628.46	
Name of Federal Candidate: Slotkin, Elissa, ,			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 544393.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Salt Lake City		State UT	Zip Code 84106		
Purpose of Expenditure Digital Placement		Category/ Type 004		Amount 23000.00	
Name of Federal Candidate: Slotkin, Elissa, ,			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 567393.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			199628.46		
(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.					
Signature Crosby, Caleb, ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1340 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee OnMessage, Inc <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022	
Mailing Address 817 Slaters Lane		Amount 13000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.129
Purpose of Expenditure Media Production		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022
Name of Federal Candidate: Slotkin, Elissa, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
580393.04			
Full Name of Payee RumbleUp, LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2022	
Mailing Address 2001 K St NW		Amount 8300.00	
City Washington	State DC	Zip Code 20006	Transaction ID : SE.130
Purpose of Expenditure Text Messages		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022
Name of Federal Candidate: Slotkin, Elissa, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
588693.04			
(a) SUBTOTAL of Itemized Independent Expenditures		21300.00	
(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.			
Crosby, Caleb, , , Signature		Date MM / DD / YYYY 09 / 22 / 2022	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1341 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>
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Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report	New report	Amends report filed on MM / DD / YYYY
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Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">176257.46</div> Transaction ID : SE.131 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022	
City New Albany	State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/ Type 004		
Name of Federal Candidate: Slotkin, Elissa, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought 764950.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Arena LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022	
Mailing Address 1260 Stringham Ave #350			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">23000.00</div> Transaction ID : SE.132 Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022	
City Salt Lake City	State UT	Zip Code 84106		
Purpose of Expenditure Digital Placement		Category/ Type 004		
Name of Federal Candidate: Slotkin, Elissa, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought 787950.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">199257.46</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1342 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Red Eagle Media			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2022		
Mailing Address 815 Slaters Lane			Amount 35000.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.133		
Purpose of Expenditure Digital Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 29 / 2022		
Name of Federal Candidate: Kildee, Daniel, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 268497.80			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Red Eagle Media			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2022		
Mailing Address 815 Slaters Lane			Amount 102090.75		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.134		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2022		
Name of Federal Candidate: Kildee, Daniel, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 370588.55			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			137090.75		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1343 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee RumbleUp, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2022		
Mailing Address 2001 K St NW			Amount 7000.00		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.135		
Purpose of Expenditure Text Messages		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2022		
Name of Federal Candidate: Kildee, Daniel, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee The Hereford Agency			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2022		
Mailing Address 5301 Burke Dr			Amount 13000.00		
City Alexandria	State VA	Zip Code 22309	Transaction ID : SE.136		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022		
Name of Federal Candidate: Kildee, Daniel, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			20000.00		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1344 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media Group			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 35000.00 </div> Transaction ID : SE.137 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 / 31 / 2022 </div>	
City Alexandria	State VA	Zip Code 22314		
Purpose of Expenditure Digital Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Kildee, Daniel, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought 425588.55 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 118110.00 </div> Transaction ID : SE.138 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 01 / 2022 </div>	
City Alexandria	State VA	Zip Code 22314		
Purpose of Expenditure Media Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Kildee, Daniel, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought 543698.55 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	 153110.00
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1345 OF 1424
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee The Hereford Agency			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2022		
Mailing Address 5301 Burke Dr			Amount 13000.00		
City Alexandria	State VA	Zip Code 22309	Transaction ID : SE.139		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 10 / 2022		
Name of Federal Candidate: Kildee, Daniel, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 556698.55			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Red Eagle Media			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
Mailing Address 815 Slaters Lane			Amount 138058.50		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.140		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 08 / 2022		
Name of Federal Candidate: Kildee, Daniel, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 694757.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			151058.50		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1346 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Red Eagle Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
Mailing Address 815 Slaters Lane			Amount 55000.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.141		
Purpose of Expenditure Digital Placement		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022		
Name of Federal Candidate: Kildee, Daniel, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Arena LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 1260 Stringham Ave #350			Amount 20000.00		
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.142		
Purpose of Expenditure Digital Placement		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2022		
Name of Federal Candidate: Marlinga, Carl, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			75000.00		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1347 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City OH	State OH	Zip Code 43504	Amount 422058.88		
Purpose of Expenditure Media Placement		Category/ Type 004	Transaction ID : SE.143 Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022		
Name of Federal Candidate: Marlinga, Carl, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought 442058.88			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Something Else Strategies, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 212 Golden Willow Court			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City Easley	State SC	Zip Code 29642	Amount 13000.00		
Purpose of Expenditure Media Production		Category/ Type 004	Transaction ID : SE.144 Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2022		
Name of Federal Candidate: Marlinga, Carl, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought 455058.88			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			435058.88		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1348 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Washington	State DC	Zip Code 20006	Amount 5700.00		
Purpose of Expenditure Text Messages		Category/ Type 004	Transaction ID : SE.145 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: Marlinga, Carl, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 460758.88			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany	State OH	Zip Code 43504	Amount 422058.88		
Purpose of Expenditure Media Placement		Category/ Type 004	Transaction ID : SE.146 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022		
Name of Federal Candidate: Marlinga, Carl, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 882817.76			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			427758.88		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1349 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
Mailing Address 1260 Stringham Ave #350			Amount 20000.00		
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.147 Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022		
Purpose of Expenditure Digital Placement		Category/ Type 004			
Name of Federal Candidate: Marlinga, Carl, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 902817.76			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Cavalry LLC			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 1634 Eye Street NW #800			Amount 36000.00		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.148 Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2022		
Purpose of Expenditure Digital Placement		Category/ Type 004			
Name of Federal Candidate: Kistner, Tyler, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought 36000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			56000.00		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1350 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Cavalry LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW #800			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Washington		State DC	Amount 36000.00		
Purpose of Expenditure Digital Placement		Category/Type 004		Transaction ID : SE.149 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 31 / 2022	
Name of Federal Candidate: Craig, Angela, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought			72000.00 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City New Albany		State OH	Amount 57224.43		
Purpose of Expenditure Media Placement		Category/Type 004		Transaction ID : SE.150 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022	
Name of Federal Candidate: Kistner, Tyler, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought			129224.43 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			93224.43		
(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.					
Crosby, Caleb, , , Signature			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1351 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 515019.88 </div> Transaction ID : SE.151 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 02 / 2022 </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Media Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Craig, Angela, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 644244.31 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item RumbleUp, LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address 2001 K St NW			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 2550.00 </div> Transaction ID : SE.152 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
City Washington	State DC	Zip Code 20006		
Purpose of Expenditure Text Messages		Category/Type 004		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Kistner, Tyler, , , <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 646794.31 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	517569.88
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1352 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Washington	State DC	Zip Code 20006	Amount 2550.00		
Purpose of Expenditure Text Messages		Category/ Type 004	Transaction ID : SE.153 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: Craig, Angela, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought 649344.31			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Red Elephant Strategy LLC			<input type="checkbox"/> Memo Item		
Mailing Address 25475 Marsh Landing Pkwy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Ponte Vedra Beach	State FL	Zip Code 32082	Amount 13000.00		
Purpose of Expenditure Media Production		Category/ Type 004	Transaction ID : SE.154 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: Craig, Angela, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought 662344.31			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			15550.00		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1353 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M M

D D D

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Red Elephant Strategy LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2022</div> </div>	
Mailing Address 25475 Marsh Landing Pkwy			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10000.00</div> Transaction ID : SE.155 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">07</div> <div style="border: 1px solid black; padding: 2px;">2022</div> </div>	
City Ponte Vedra Beach	State FL	Zip Code 32082		
Purpose of Expenditure Media Production		Category/Type 004		
Name of Federal Candidate: Kistner, Tyler, , , <div style="display: flex; justify-content: flex-end; align-items: center;"> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div>			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 672344.31			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">14</div> <div style="border: 1px solid black; padding: 2px;">2022</div> </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">520821.39</div> Transaction ID : SE.156 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">2022</div> </div>	
City New Albany	State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/Type 004		
Name of Federal Candidate: Craig, Angela, , , <div style="display: flex; justify-content: flex-end; align-items: center;"> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div>			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 1193165.70			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	530821.39
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M M

D D D

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09

22

2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1354 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany	State OH	Zip Code 43504	Amount 57869.04		
Purpose of Expenditure Media Placement		Category/ Type 004	Transaction ID : SE.157 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022		
Name of Federal Candidate: Kistner, Tyler, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 02 State: MN		
Calendar Year-To-Date Per Election for Office Sought 1251034.74			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Cavalry LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Washington	State DC	Zip Code 20006	Amount 36000.00		
Purpose of Expenditure Digital Placement		Category/ Type 004	Transaction ID : SE.158 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Name of Federal Candidate: Kistner, Tyler, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 02 State: MN		
Calendar Year-To-Date Per Election for Office Sought 1287034.74			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			93869.04		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1355 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Cavalry LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address 1634 Eye Street NW				Amount 36000.00	
City Washington		State DC		Zip Code 20006	
Purpose of Expenditure Digital Placement				Category/Type 004	
Name of Federal Candidate: Craig, Angela, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 1323034.74				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Arena LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022	
Mailing Address 1260 Stringham Ave #350				Amount 41000.00	
City Salt Lake City		State UT		Zip Code 84106	
Purpose of Expenditure Digital Placement				Category/Type 004	
Name of Federal Candidate: Vargas, Anthony, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE	
Calendar Year-To-Date Per Election for Office Sought 41000.00				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				77000.00	
(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.					
Signature <u>Crosby, Caleb, , ,</u>				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1356 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address PO Box 1051					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
City New Albany		State OH	Zip Code 43054		Amount 170567.25
Purpose of Expenditure Media Placement			Category/Type 004		Transaction ID : SE.161 Date of Disbursement or Obligation
Name of Federal Candidate: Vargas, Anthony, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought			211567.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Something Else Strategies, LLC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 212 Golden Willow Court					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
City Easley		State SC	Zip Code 29642		Amount 13000.00
Purpose of Expenditure Media Production			Category/Type 004		Transaction ID : SE.162 Date of Disbursement or Obligation
Name of Federal Candidate: Vargas, Anthony, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought			224567.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					183567.25
(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.					
Signature <i>Crosby, Caleb, , ,</i>			[Electronically Filed]		Date
					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1357 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Washington		State DC	Amount 5400.00		
Zip Code 20006		Transaction ID : SE.163			
Purpose of Expenditure Text Messages			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Category/Type 004					
Name of Federal Candidate: Vargas, Anthony, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE					
Calendar Year-To-Date Per Election for Office Sought 229967.25			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Amount 182717.50		
Zip Code 43504		Transaction ID : SE.164			
Purpose of Expenditure Media Placement			Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022		
Category/Type 004					
Name of Federal Candidate: Vargas, Anthony, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE					
Calendar Year-To-Date Per Election for Office Sought 412684.75			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="text-align: right;"> 188117.50 </div> </div>					
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.					
Signature <u>Crosby, Caleb, , ,</u> [Electronically Filed]			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1358 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 41000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.165 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022
Name of Federal Candidate: Vargas, Anthony, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought			453684.75 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Something Else Strategies, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 212 Golden Willow Court			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Easley		State SC	Zip Code 29642		Amount 13000.00
Purpose of Expenditure Media Production			Category/ Type 004		Transaction ID : SE.166 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022
Name of Federal Candidate: Vargas, Anthony, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought			466684.75 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				54000.00	
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1359 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 					
Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 1051				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
City New Albany		State OH	Zip Code 43504	838807.81 Transaction ID : SE.167 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Media Placement			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Pappas, Chris, , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">838807.81</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Arena LLC				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1260 Stringham Ave #350				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
City Salt Lake City		State UT	Zip Code 84106	69000.00 Transaction ID : SE.168 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Placement			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Pappas, Chris, , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">907807.81</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
(c) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
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.					
Signature <u>Crosby, Caleb, ,</u>				Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1360 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media Group			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">75000.00</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.169 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Placement		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Malinowski, Tom, , , <div style="float: right;"> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div>			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">75000.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">206375.37</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.170 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Media Placement		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Malinowski, Tom, , , <div style="float: right;"> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div>			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">281375.37</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">281375.37</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

M M M /

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Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1361 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item Outlaw Media, LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address 3532 Goddard Way			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 21008.52 </div> Transaction ID : SE.171 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 02 / 2022 </div>	
City Alexandria	State VA	Zip Code 22304		
Purpose of Expenditure Media Production		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Malinowski, Tom, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought 302383.89			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Outlaw Media, LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address 3532 Goddard Way			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 13000.00 </div> Transaction ID : SE.172 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 02 / 2022 </div>	
City Alexandria	State VA	Zip Code 22304		
Purpose of Expenditure Media Production		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Malinowski, Tom, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought 315383.89			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	34008.52
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

MM / DD / YYYY

09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1362 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Washington		State DC	Amount 5100.00		
Zip Code 20006		Transaction ID : SE.173			
Purpose of Expenditure Text Messages		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022	
Name of Federal Candidate: Malinowski, Tom, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ		
Calendar Year-To-Date Per Election for Office Sought			320483.89 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Red Eagle Media			<input type="checkbox"/> Memo Item		
Mailing Address 815 Slaters Lane			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Alexandria		State VA	Amount 211444.80		
Zip Code 22314		Transaction ID : SE.174			
Purpose of Expenditure Media Placement		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 08 / 2022	
Name of Federal Candidate: Malinowski, Tom, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ		
Calendar Year-To-Date Per Election for Office Sought			531928.69 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			216544.80		
(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.					
Crosby, Caleb, , , Signature			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1363 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media Group		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 14 / 2022</div> </div>	
Mailing Address 815 Slaters Lane		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">75000.00</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.175 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 11 / 2022</div> </div>
Purpose of Expenditure Digital Placement		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Malinowski, Tom, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Cavalry LLC		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 07 / 2022</div> </div>	
Mailing Address 1634 Eye Street NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">50000.00</div>	
City Washington	State DC	Zip Code 20006	Transaction ID : SE.176 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 01 / 2022</div> </div>
Purpose of Expenditure Digital Placement		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Vasquez, Gabriel, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NM	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">125000.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
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.			
Signature Crosby, Caleb, , ,		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 22 / 2022</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1364 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address PO Box 1051					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
City New Albany		State OH	Zip Code 43504		Amount 245430.41
Purpose of Expenditure Media Placement			Category/Type 004		Transaction ID : SE.177 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Name of Federal Candidate: Vasquez, Gabriel, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
			District: 02 State: NM		
Calendar Year-To-Date Per Election for Office Sought			295430.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Full Name of Payee POOLHOUSE Agency, LLC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 23 W. Broad Street Suite 302					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
City Richmond		State VA	Zip Code 23220		Amount 13000.00
Purpose of Expenditure Media Production			Category/Type 004		Transaction ID : SE.178 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Name of Federal Candidate: Vasquez, Gabriel, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
			District: 02 State: NM		
Calendar Year-To-Date Per Election for Office Sought			308430.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 258430.41					
(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.					
Signature Crosby, Caleb, ,			Date 09 / 22 / 2022		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1365 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City Washington	State DC	Zip Code 20006	Amount 3750.00		
Purpose of Expenditure Text Messages		Category/ Type 004	Transaction ID : SE.179 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: Vasquez, Gabriel, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NM		
Calendar Year-To-Date Per Election for Office Sought 312180.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany	State OH	Zip Code 43504	Amount 274455.70		
Purpose of Expenditure Media Placement		Category/ Type 004	Transaction ID : SE.180 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022		
Name of Federal Candidate: Vasquez, Gabriel, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NM		
Calendar Year-To-Date Per Election for Office Sought 586636.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			278205.70		
(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.					
Crosby, Caleb, , , Signature			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1366 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Cavalry LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Washington		State DC	Amount 50000.00		
Purpose of Expenditure Digital Placement		Zip Code 20006		Transaction ID : SE.181	
		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022	
Name of Federal Candidate: Vasquez, Gabriel, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
636636.11					
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Salt Lake City		State UT	Amount 97000.00		
Purpose of Expenditure Digital Placement		Zip Code 84106		Transaction ID : SE.182	
		Category/Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022	
Name of Federal Candidate: Lee, Susie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
97000.00					
(a) SUBTOTAL of Itemized Independent Expenditures			147000.00		
(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.					
Crosby, Caleb, , , Signature			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1367 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee KAP Print LLC			<input type="checkbox"/> Memo Item		
Mailing Address 220 Quinn Drive			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 19 / 2022		
City Dripping Springs		State TX	Zip Code 78620		
Purpose of Expenditure Direct Mail		Category/ Type 004		Amount 22581.67	
Name of Federal Candidate: Lee, Susie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV					
1009649.17					
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/ Type 004		Amount 203345.92	
Name of Federal Candidate: Maloney, Sean, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY					
203345.92					
(a) SUBTOTAL of Itemized Independent Expenditures			225927.59		
(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.					
Crosby, Caleb, , , Signature			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1368 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022	
Mailing Address PO Box 1051		Amount 75000.00	
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.185 Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022
Purpose of Expenditure Digital Placement		Category/ Type 004	
Name of Federal Candidate: Maloney, Sean, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>17</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought 278345.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022	
Mailing Address PO Box 1051		Amount 65000.00	
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.186 Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2022
Purpose of Expenditure Digital Placement		Category/ Type 004	
Name of Federal Candidate: Ryan, Patrick, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought 65000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		140000.00	
(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.			
Signature <u>Crosby, Caleb, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1369 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee FlexPoint Media INC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address PO Box 1051			Amount 162224.39		
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.187		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022		
Name of Federal Candidate: Ryan, Patrick, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 227224.39			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Prime Media Partners, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 4201 Wilson Blvd. #110-126			Amount 13000.00		
City Arlington	State VA	Zip Code 22203	Transaction ID : SE.188		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022		
Name of Federal Candidate: Ryan, Patrick, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 240224.39			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			175224.39		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1370 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y														
Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022										
Mailing Address PO Box 1051				Amount 825.00										
City New Albany		State OH		Zip Code 43054										
Purpose of Expenditure Digital Production				Category/Type 004										
Name of Federal Candidate: Ryan, Patrick, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY										
Calendar Year-To-Date Per Election for Office Sought 241049.39				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶										
Full Name of Payee <input type="checkbox"/> Memo Item RumbleUp, LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022										
Mailing Address 2001 K St NW				Amount 6200.00										
City Washington		State DC		Zip Code 20006										
Purpose of Expenditure Text Messages				Category/Type 004										
Name of Federal Candidate: Ryan, Patrick, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY										
Calendar Year-To-Date Per Election for Office Sought 247249.39				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶										
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 5px;">7025.00</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 5px;"></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 5px;"></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	7025.00	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶		(c) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	7025.00												
(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.														
Signature <u>Crosby, Caleb, , ,</u>				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022										

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1371 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee KAP Print LLC			<input type="checkbox"/> Memo Item		
Mailing Address 220 Quinn Drive			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 08 / 2022		
City Dripping Springs		State TX	Zip Code 78620		
Purpose of Expenditure Direct Mail		Category/ Type 004		Amount 31170.25	
Name of Federal Candidate: Ryan, Patrick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 278419.64			Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/ Type 004		Amount 162224.39	
Name of Federal Candidate: Ryan, Patrick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 440644.03			Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				193394.64	
(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.					
Signature <u>Crosby, Caleb, , ,</u> [Electronically Filed]			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1372 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Flexpoint Media Inc			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Zip Code 43054		Amount 65000.00
Purpose of Expenditure Digital Placement			Category/Type 004		Transaction ID : SE.193 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 11 / 2022
Name of Federal Candidate: Ryan, Patrick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought			505644.03		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022			<input type="checkbox"/> Other (specify) ▶		
Full Name of Payee KAP Print LLC			<input type="checkbox"/> Memo Item		
Mailing Address 220 Quinn Drive			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 15 / 2022		
City Dripping Springs		State TX	Zip Code 78620		Amount 31170.25
Purpose of Expenditure Direct Mail			Category/Type 004		Transaction ID : SE.194 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022
Name of Federal Candidate: Ryan, Patrick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought			536814.28		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022			<input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures					96170.25
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1373 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item KAP Print LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 15 / 2022 </div>	
Mailing Address 220 Quinn Drive			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 1786.11 </div> Transaction ID : SE.195 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 12 / 2022 </div>	
City Dripping Springs	State TX	Zip Code 78620		
Purpose of Expenditure Direct Mail		Category/Type 004		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Schmitt, Colin, J, , <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought 538600.39			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item KAP Print LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 15 / 2022 </div>	
Mailing Address 220 Quinn Drive			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 1786.11 </div> Transaction ID : SE.196 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 12 / 2022 </div>	
City Dripping Springs	State TX	Zip Code 78620		
Purpose of Expenditure Direct Mail		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Ryan, Patrick, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought 540386.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	3572.22
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee KAP Print LLC			<input type="checkbox"/> Memo Item		
Mailing Address 220 Quinn Drive			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		
City Dripping Springs		State TX	Zip Code 78620		
Purpose of Expenditure Direct Mail		Category/ Type 004		Amount 31170.25	
Name of Federal Candidate: Ryan, Patric, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 621556.75			Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee KAP Print LLC			<input type="checkbox"/> Memo Item		
Mailing Address 220 Quinn Drive			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 29 / 2022		
City Dripping Springs		State TX	Zip Code 78620		
Purpose of Expenditure Direct Mail		Category/ Type 004		Amount 31170.25	
Name of Federal Candidate: Ryan, Patrick, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 652727.00			Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				62340.50	
(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.					
Signature Crosby, Caleb, , ,			Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Red Eagle Media Group <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address 815 Slaters Lane		Amount 50000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.199
Purpose of Expenditure Digital Placement		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 31 / 2022
Name of Federal Candidate: Conole, Francis, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 50000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee DMM Media <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022	
Mailing Address 8588 Richmond Highway Ste 90546		Amount 13000.00	
City Alexandria	State VA	Zip Code 22309	Transaction ID : SE.200
Purpose of Expenditure Media Production		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 08 / 2022
Name of Federal Candidate: Conole, Francis, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 63000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		63000.00	
(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.			
Crosby, Caleb, , , Signature		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1376 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ➤ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> </div>	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
City New Albany		State OH	Amount 387430.66		
Zip Code 43504		Transaction ID : SE.201			
Purpose of Expenditure Media Placement		Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022	
Name of Federal Candidate: Conole, Francis, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			450430.66		
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
City Salt Lake City		State UT	Amount 35000.00		
Zip Code 84106		Transaction ID : SE.202			
Purpose of Expenditure Digital Placement		Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2022	
Name of Federal Candidate: Landsman, Greg, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			35000.00		
(a) SUBTOTAL of Itemized Independent Expenditures			422430.66		
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed]		
Date			MM / DD / YYYY 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1377 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">50000.00</div>	
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.203 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Placement		Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Sykes, Emilia, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">50000.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Honold Communications			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 32 West Lake Street			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">14043.25</div>	
City Skaneateles	State NY	Zip Code 13152	Transaction ID : SE.204 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Media Production		Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <input type="checkbox"/> Support Sykes, Emilia, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">64043.25</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	64043.25
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1378 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee FlexPoint Media INC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address PO Box 1051			Amount 510125.00		
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.205		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022		
Name of Federal Candidate: Sykes, Emilia, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 574168.25			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Flexpoint Media Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address PO Box 1051			Amount 525.00		
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.206		
Purpose of Expenditure Digital Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2022		
Name of Federal Candidate: Sykes, Emilia, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 574693.25			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			510650.00		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1379 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City Washington	State DC	Zip Code 20006	Amount 7500.00		
Purpose of Expenditure Text Messages		Category/ Type 004	Transaction ID : SE.207 Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022		
Name of Federal Candidate: Sykes, Emilia, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 582193.25			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
City New Albany	State OH	Zip Code 43504	Amount 510148.19		
Purpose of Expenditure Media Placement		Category/ Type 004	Transaction ID : SE.208 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022		
Name of Federal Candidate: Sykes, Emilia, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 1092341.44			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			517648.19		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1380 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y											
Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022							
Mailing Address PO Box 1051				Amount 50000.00							
City New Albany		State OH		Zip Code 43054							
Purpose of Expenditure Digital Placement				Category/Type 004							
Name of Federal Candidate: Sykes, Emilia, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH							
Calendar Year-To-Date Per Election for Office Sought 1142341.44				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input type="checkbox"/> Memo Item Honold Communications				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022							
Mailing Address 32 West Lake Street				Amount 12384.50							
City Skaneateles		State NY		Zip Code 13152							
Purpose of Expenditure Media Production				Category/Type 004							
Name of Federal Candidate: Sykes, Emilia, , ,				<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH							
Calendar Year-To-Date Per Election for Office Sought 1154725.94				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width:40%; text-align: right;">62384.50</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;"></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures</td> <td style="text-align: right;"></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	62384.50	(b) SUBTOTAL of Unitemized Independent Expenditures.....		(c) TOTAL Independent Expenditures	
(a) SUBTOTAL of Itemized Independent Expenditures	62384.50										
(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.											
Crosby, Caleb, , , Signature				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022							

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1381 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Blitz Canvassing LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 7600 E Eastman Ave #405			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>	
City Denver	State CO	Zip Code 80231		
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>		

Transaction ID : SE.211

Date of Disbursement or Obligation

M M M /

D D D /

Y Y Y Y Y Y

Name of Federal Candidate: McLeod-Skinner, Jamie, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">75000.00</div>	

 Disbursement For: ☐ Primary ☒ General
☐ Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Blitz Canvassing LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 7600 E Eastman Ave #405			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>	
City Denver	State CO	Zip Code 80231		
Purpose of Expenditure Canvassing		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>		

Transaction ID : SE.212

Date of Disbursement or Obligation

M M M /

D D D /

Y Y Y Y Y Y

Name of Federal Candidate: Chavez-DeRemer, Lori, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">125000.00</div>	

 Disbursement For: ☐ Primary ☒ General
☐ 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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1382 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on MM / DD / YYYY					
Full Name of Payee Arena <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 02 / 2022		
Mailing Address 1260 Stringham Ave #350			Amount 4500.50		
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.213 Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2022		
Purpose of Expenditure Canvassing		Category/ Type 004			
Name of Federal Candidate: Chavez-DeRemer, Lori, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR		
Calendar Year-To-Date Per Election for Office Sought 129500.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Arena <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 02 / 2022		
Mailing Address 1260 Stringham Ave #350			Amount 4500.50		
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.214 Date of Disbursement or Obligation MM / DD / YYYY 08 / 30 / 2022		
Purpose of Expenditure Canvassing		Category/ Type 004			
Name of Federal Candidate: McLeod-Skinner, Jamie, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR		
Calendar Year-To-Date Per Election for Office Sought 134001.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			9001.00		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1383 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee Cavalry LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW #800			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
City Washington		State DC	Zip Code 20006		
Purpose of Expenditure Digital Placement		Category/ Type		<div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: McLeod-Skinner, Jamie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;">200001.00</div>		
Office Sought:			<input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR		
Disbursement For:			<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
City New Albany		State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/ Type		<div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: McLeod-Skinner, Jamie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;">635466.89</div>		
Office Sought:			<input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR		
Disbursement For:			<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px;">501465.89</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px;"></div>		
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px;"></div>		
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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date	
				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1384 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee DMM Media			<input type="checkbox"/> Memo Item		
Mailing Address 8588 Richmond Highway Ste 90546			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City Alexandria		State VA	Zip Code 22309		Amount 22623.98
Purpose of Expenditure Media Production			Category/Type 004		Transaction ID : SE.217 Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022
Name of Federal Candidate: McLeod-Skinner, Jamie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought			658090.87		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City Washington		State DC	Zip Code 20006		Amount 9750.00
Purpose of Expenditure Text Messages			Category/Type 004		Transaction ID : SE.218 Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022
Name of Federal Candidate: McLeod-Skinner, Jamie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought			667840.87		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				32373.98	
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1385 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City New Albany		State OH	Zip Code 43504		Amount 434978.95
Purpose of Expenditure Media Placement			Category/Type 004		Transaction ID : SE.219 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 09 / 2022
Name of Federal Candidate: McLeod-Skinner, Jamie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought 1102819.82			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee DMM Media			<input type="checkbox"/> Memo Item		
Mailing Address 8588 Richmond Highway Ste 90546			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Alexandria		State VA	Zip Code 22309		Amount 13000.00
Purpose of Expenditure Media Production			Category/Type 004		Transaction ID : SE.220 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 10 / 2022
Name of Federal Candidate: McLeod-Skinner, Jamie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought 1115819.82			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				447978.95	
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1386 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Cavalry LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2022		
City Washington		State DC	Zip Code 20006	Amount 66000.00	
Purpose of Expenditure Digital Placement			Category/Type 004	Transaction ID : SE.221 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 12 / 2022	
Name of Federal Candidate: McLeod-Skinner, Jamie, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR	
Calendar Year-To-Date Per Election for Office Sought			1181819.82	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Red Eagle Media			<input type="checkbox"/> Memo Item		
Mailing Address 815 Slaters Lane			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 01 / 2022		
City Alexandria		State VA	Zip Code 22314	Amount 241762.80	
Purpose of Expenditure Media Placement			Category/Type 004	Transaction ID : SE.222 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 31 / 2022	
Name of Federal Candidate: Cartwright, Matthew, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought			291762.80	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				307762.80	
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed]	Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1387 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee RumbleUp, LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2001 K St NW Unit 719			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7000.00</div>	
City Washington	State DC	Zip Code 20006		
Purpose of Expenditure Text Messages		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.223 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Cartwright, Matthew, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">298762.80</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Red Eagle Media Group <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">75000.00</div>	
City Alexandria	State VA	Zip Code 22314		
Purpose of Expenditure Digital Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.224 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Cartwright, Matthew, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">373762.80</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	82000.00
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

09

22

2022

Signature

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1388 OF 1424
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on / /

Full Name of Payee Red Maverick Media			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1426 N 3rd St Suite 310				Amount <input type="text"/> 13000.00	
City Harrisburg	State PA	Zip Code 17102		Transaction ID : SE.225	
Purpose of Expenditure Media Production			Category/ Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Cartwright, Matthew, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <input type="text"/> 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: <input type="text"/> PA	
Calendar Year-To-Date Per Election for Office Sought			<input type="text"/> 386762.80	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Red Eagle Media Group			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 815 Slaters Lane				Amount <input type="text"/> 75000.00	
City Alexandria	State VA	Zip Code 22314		Transaction ID : SE.226	
Purpose of Expenditure Digital Placement			Category/ Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Cartwright, Matthew, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <input type="text"/> 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: <input type="text"/> PA	
Calendar Year-To-Date Per Election for Office Sought			<input type="text"/> 461762.80	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 88000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1389 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 07 / 2022 </div>	
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 241800.00 </div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.227 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 01 / 2022 </div>	
Purpose of Expenditure Media Placement			Category/ Type <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;">004</div>	
Name of Federal Candidate: Cartwright, Matthew, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA </div> </div>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 703562.80 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 14 / 2022 </div>	
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 243683.25 </div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.228 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 08 / 2022 </div>	
Purpose of Expenditure Media Placement			Category/ Type <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;">004</div>	
Name of Federal Candidate: Cartwright, Matthew, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA </div> </div>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 947246.05 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 485483.25 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>	
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.				
Signature <u>Crosby, Caleb, , ,</u> [Electronically Filed]			Date <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 22 / 2022 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1390 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Red Eagle Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
Mailing Address 815 Slaters Lane			Amount 125000.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.229		
Purpose of Expenditure Digital Placement		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022		
Name of Federal Candidate: Cartwright, Matthew, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee OnMessage, Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 817 Slaters Lane			Amount 33280.34		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.230		
Purpose of Expenditure Media Production		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2022		
Name of Federal Candidate: Deluzio, Christopher, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			158280.34		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1391 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>09 / 07 / 2022</div> </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">75000.00</div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.231 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>09 / 01 / 2022</div> </div>	
Name of Federal Candidate: Deluzio, Christopher, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>17</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">108280.34</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>09 / 07 / 2022</div> </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">456320.72</div>	
City New Albany	State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.232 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>09 / 02 / 2022</div> </div>	
Name of Federal Candidate: Deluzio, Christopher, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>17</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">564601.06</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	531320.72
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

MM / DD / YYYY

09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1392 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022	
Mailing Address PO Box 1051				Amount 750.00	
City New Albany		State OH		Zip Code 43054	
Purpose of Expenditure Digital Production				Category/Type 004	
Name of Federal Candidate: Deluzio, Christopher, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 565351.06				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item RumbleUp, LLC				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022	
Mailing Address 2001 K St NW				Amount 7000.00	
City Washington		State DC		Zip Code 20006	
Purpose of Expenditure Text Messages				Category/Type 004	
Name of Federal Candidate: Deluzio, Christopher, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 572351.06				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				7750.00	
(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.					
Crosby, Caleb, , , Signature				Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1393 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 14 / 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 454419.35 </div> Transaction ID : SE.235 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 09 / 2022 </div>	
City New Albany	State OH	Zip Code 43504		
Purpose of Expenditure Media Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Deluzio, Chris, , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 1026770.41 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Flexpoint Media Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 14 / 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 75000.00 </div> Transaction ID : SE.236 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 / 10 / 2022 </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Digital Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Deluzio, Chris, , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 1101770.41 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	529419.35
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1395 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Prime Media Partners, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 4201 Wilson Blvd. #110-126			Amount 13000.00		
City Arlington	State VA	Zip Code 22203	Transaction ID : SE.240		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2022		
Name of Federal Candidate: Vallejo, Michelle, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>15</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 444150.55			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee RumbleUp, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 2001 K St NW			Amount 5600.00		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.241		
Purpose of Expenditure Text Messages		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022		
Name of Federal Candidate: Vallejo, Michelle, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>15</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 449750.55			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			18600.00		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1396 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Arena LLC			<input type="checkbox"/> Memo Item		
Mailing Address 1260 Stringham Ave #350			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
City Salt Lake City		State UT	Zip Code 84106		Amount 12000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.242 Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2022
Name of Federal Candidate: Vallejo, Michelle, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 15 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought			461750.55 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Flexpoint Media Inc			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City New Albany		State OH	Zip Code 43054		Amount 65000.00
Purpose of Expenditure Digital Placement			Category/ Type 004		Transaction ID : SE.243 Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022
Name of Federal Candidate: Cuellar, Henry, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 28 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought			265000.00 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				77000.00	
(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.					
Crosby, Caleb, , , Signature			[Electronically Filed] Date MM / DD / YYYY 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1397 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee FlexPoint Media INC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address PO Box 1051			Amount 206248.17		
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.244		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022		
Name of Federal Candidate: Cuellar, Henry, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>28</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 471248.17			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee OnMessage, Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 817 Slaters Lane			Amount 13000.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.245		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2022		
Name of Federal Candidate: Cuellar, Henry, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>28</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 484248.17			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			219248.17		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1398 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee RumbleUp, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 2001 K St NW			Amount 6700.00		
City Washington		State DC	Zip Code 20006		Transaction ID : SE.246
Purpose of Expenditure Text Messages		Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022	
Name of Federal Candidate: Cuellar, Henry, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 28 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Flexpoint Media Inc			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address PO Box 1051			Amount 600.00		
City New Albany		State OH	Zip Code 43054		Transaction ID : SE.247
Purpose of Expenditure Digital Production		Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022	
Name of Federal Candidate: Cuellar, Henry, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 28 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			7300.00		
(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.					
Signature <u>Crosby, Caleb, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1399 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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 Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on / /

Full Name of Payee Flexpoint Media Inc			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO Box 1051				Amount <input type="text"/>	
City New Albany	State OH	Zip Code 43054		Transaction ID : SE.248	
Purpose of Expenditure Digital Production		Category/ Type <input type="text"/>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Cuellar, Henry, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>28</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			495348.17	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO Box 1051				Amount <input type="text"/>	
City New Albany	State OH	Zip Code 43504		Transaction ID : SE.249	
Purpose of Expenditure Media Placement		Category/ Type <input type="text"/>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Cuellar, Henry, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>28</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			588098.17	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1401 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee FlexPoint Media INC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 11 / 2022	
Mailing Address PO Box 1051		Amount 273362.08	
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.252
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022
Name of Federal Candidate: Gonzalez, Vicente, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>34</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought 680362.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Red Eagle Media Group <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 11 / 2022	
Mailing Address 815 Slaters Lane		Amount 65000.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.253
Purpose of Expenditure Digital Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022
Name of Federal Candidate: Gonzalez, Vicente, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>34</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought 745362.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		338362.08	
(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.			
Crosby, Caleb, , , Signature		Date MM / DD / YYYY 09 / 22 / 2022	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1402 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item OnMessage, Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 11 2022 </div>	
Mailing Address 817 Slaters Lane				
City Alexandria	State VA	Zip Code 22314	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 15000.00 </div>	
Purpose of Expenditure Media Production			Transaction ID : SE.254 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 10 2022 </div>	
Name of Federal Candidate: Gonzalez, Vicente, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 34 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 829437.64 </div>				

Full Name of Payee <input type="checkbox"/> Memo Item OnMessage, Inc			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 11 2022 </div>	
Mailing Address 817 Slaters Lane				
City Alexandria	State VA	Zip Code 22314	Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 13000.00 </div>	
Purpose of Expenditure Media Production			Transaction ID : SE.255 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 09 10 2022 </div>	
Name of Federal Candidate: Gonzalez, Vicente, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 34 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 842437.64 </div>				

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;">28000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"></div>
(c) TOTAL Independent Expenditures	▶ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"></div>

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 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1403 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media Group				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 815 Slaters Lane				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">75000.00</div>	
City Alexandria		State VA		Zip Code 22314	
Purpose of Expenditure Digital Placement				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Luria, Elaine, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">604438.20</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 815 Slaters Lane				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">307499.85</div>	
City Alexandria		State VA		Zip Code 22314	
Purpose of Expenditure Media Placement				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Luria, Elaine, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">911938.05</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">382499.85</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
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.					
Signature <u>Crosby, Caleb, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1404 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Something Else Strategies, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Mailing Address 212 Golden Willow Court			Amount 13000.00		
City Easley	State SC	Zip Code 29642	Transaction ID : SE.258		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 06 / 2022		
Name of Federal Candidate: Luria, Elaine, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought 924938.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee RumbleUp, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Mailing Address 2001 K St NW			Amount 6300.00		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.259		
Purpose of Expenditure Text Messages		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: Luria, Elaine, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought 931238.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			19300.00		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1405 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Targeted Victory LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2311 Wilson Blvd Suite 200			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2022		
City Arlington		State VA	Amount 50000.00		
Purpose of Expenditure Digital Placement		Category/ Type 004		Transaction ID : SE.260 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022	
Name of Federal Candidate: Kiggans, Jennifer, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>		
Calendar Year-To-Date Per Election for Office Sought 981238.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee KAP Print LLC			<input type="checkbox"/> Memo Item		
Mailing Address 220 Quinn Drive			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2022		
City Dripping Springs		State TX	Amount 33363.87		
Purpose of Expenditure Direct Mail		Category/ Type 004		Transaction ID : SE.261 Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022	
Name of Federal Candidate: Luria, Elaine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>		
Calendar Year-To-Date Per Election for Office Sought 1014601.92			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			83363.87		
(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.					
Crosby, Caleb, , , Signature			Date MM / DD / YYYY 09 / 22 / 2022		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1406 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 815 Slaters Lane				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">303203.25</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.262 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Media Placement		Category/Type 004	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Luria, Elaine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1317805.17</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2022		
Full Name of Payee <input type="checkbox"/> Memo Item Red Eagle Media Group				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 815 Slaters Lane				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">75000.00</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.263 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Digital Placement		Category/Type 004	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: Luria, Elaine, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1392805.17</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2022		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">378203.25</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
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.					
Signature <i>Crosby, Caleb, , ,</i>			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
[Electronically Filed]			09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1407 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee KAP Print LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2022		
Mailing Address 220 Quinn Drive			Amount 33363.87		
City Dripping Springs	State TX	Zip Code 78620	Transaction ID : SE.264		
Purpose of Expenditure Direct Mail		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2022		
Name of Federal Candidate: Luria, Elaine, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought 1439169.04			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Ascent Media LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 7600 E. Eastman Avenue Suite 405			Amount 13000.00		
City Denver	State CO	Zip Code 80231	Transaction ID : SE.265		
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2022		
Name of Federal Candidate: Schrier, Kim, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA		
Calendar Year-To-Date Per Election for Office Sought 672162.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			46363.87		
(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.					
Signature <i>Crosby, Caleb, , ,</i>		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1409 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee RumbleUp, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
Mailing Address 2001 K St NW			Amount 4300.00		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.268		
Purpose of Expenditure Text Messages		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022		
Name of Federal Candidate: Schrier, Kim, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA		
Calendar Year-To-Date Per Election for Office Sought 1210319.16			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022		
Mailing Address PO Box 1051			Amount 463856.66		
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.269		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022		
Name of Federal Candidate: Schrier, Kim, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA		
Calendar Year-To-Date Per Election for Office Sought 1674175.82			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			468156.66		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 1410 OF 1424
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00504530</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>				
Full Name of Payee Arena LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 09 / 14 / 2022	
Mailing Address 1260 Stringham Ave #350			Amount <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">70000.00</div>	
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.270 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 09 / 11 / 2022	
Purpose of Expenditure Digital Placement			Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: Schrier, Kim, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA	
Calendar Year-To-Date Per Election for Office Sought <div style="border-bottom: 1px solid black; width: 150px; text-align: right;">1744175.82</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Flexpoint Media Inc <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 09 / 07 / 2022	
Mailing Address PO Box 1051			Amount <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">20000.00</div>	
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.271 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 08 / 31 / 2022	
Purpose of Expenditure Digital Placement			Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: Pfaff, Brad, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought <div style="border-bottom: 1px solid black; width: 150px; text-align: right;">20000.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</div><div style="width: 35%; text-align: right;"><div style="border-bottom: 1px solid black; width: 100%; text-align: right;">90000.00</div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="width: 35%; text-align: right;"><div style="border-bottom: 1px solid black; width: 100%; text-align: right;"></div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures</div><div style="width: 35%; text-align: right;"><div style="border-bottom: 1px solid black; width: 100%; text-align: right;"></div></div></div>				
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 40%;">Crosby, Caleb, , , Signature</div><div style="width: 20%; text-align: center;">[Electronically Filed]</div><div style="width: 30%; text-align: right;">Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 09 / 22 / 2022</div></div>				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1411 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City New Albany	State OH	Zip Code 43504	Amount 90408.06		
Purpose of Expenditure Media Placement		Category/Type 004	Transaction ID : SE.272 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 02 / 2022		
Name of Federal Candidate: Pfaff, Brad, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought 110408.06			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Flexpoint Media Inc			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
City New Albany	State OH	Zip Code 43054	Amount 150.00		
Purpose of Expenditure Digital Production		Category/Type 004	Transaction ID : SE.273 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 06 / 2022		
Name of Federal Candidate: Pfaff, Brad, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought 110558.06			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			90558.06		
(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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1412 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Red Elephant Strategy LLC			<input type="checkbox"/> Memo Item		
Mailing Address 25475 Marsh Landing Pkwy			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City Ponte Vedra Beach		State FL	Zip Code 32082		
Purpose of Expenditure Media Production		Category/ Type		Amount 13000.00	
		004		Transaction ID : SE.274 Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2022	
Name of Federal Candidate: Pfaff, Brad, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
123558.06					
Full Name of Payee RumbleUp, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2001 K St NW			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2022		
City Washington		State DC	Zip Code 20006		
Purpose of Expenditure Text Messages		Category/ Type		Amount 6300.00	
		004		Transaction ID : SE.275 Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2022	
Name of Federal Candidate: Pfaff, Brad, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
129858.06					
(a) SUBTOTAL of Itemized Independent Expenditures			▶ 19300.00		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1413 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ➤ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> </div>	
Full Name of Payee FlexPoint Media INC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022
Mailing Address PO Box 1051			Amount 90408.06		Transaction ID : SE.276
City New Albany	State OH	Zip Code 43504	Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022		
Purpose of Expenditure Media Placement		Category/ Type 004	Name of Federal Candidate: Pfaff, Brad, , ,		
		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought		220266.12	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Advantage Inc			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 25 / 2022
Mailing Address 9420 Bonita Beach Road SE Suite 200			Amount 14199.84		Transaction ID : SE.277
City Bonita Springs	State FL	Zip Code 34135	Date of Disbursement or Obligation MM / DD / YYYY 08 / 26 / 2022		
Purpose of Expenditure Phone Calls		Category/ Type 004	Name of Federal Candidate: Mowers, Matt, , ,		
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought		289019.87	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			104607.90		
(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.					
Crosby, Caleb, , ,		[Electronically Filed]		Date	
Signature				MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1414 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 27 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 53331.25 </div> Transaction ID : SE.278 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 26 2022 </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Media Placement		Category/Type 004		
Name of Federal Candidate: <input type="checkbox"/> Support Pappas, Chris, , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought 373757.85 			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 27 2022 </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 53331.25 </div> Transaction ID : SE.279 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 26 2022 </div>	
City New Albany	State OH	Zip Code 43054		
Purpose of Expenditure Media Placement		Category/Type 004		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support Mowers, Matt, , <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought 427089.10 			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	106662.50
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1415 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee OnMessage, Inc			<input type="checkbox"/> Memo Item		
Mailing Address 817 Slaters Lane			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 27 / 2022		
City Alexandria		State VA	Zip Code 22314		
Purpose of Expenditure Media Production		Category/ Type		Amount 6500.00	
		004		Transaction ID : SE.280 Date of Disbursement or Obligation MM / DD / YYYY 08 / 26 / 2022	
Name of Federal Candidate: Pappas, Chris, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
433589.10					
Full Name of Payee OnMessage, Inc			<input type="checkbox"/> Memo Item		
Mailing Address 817 Slaters Lane			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 27 / 2022		
City Alexandria		State VA	Zip Code 22314		
Purpose of Expenditure Media Production		Category/ Type		Amount 6500.00	
		004		Transaction ID : SE.281 Date of Disbursement or Obligation MM / DD / YYYY 08 / 26 / 2022	
Name of Federal Candidate: Mowers, Matt, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
440089.10					
(a) SUBTOTAL of Itemized Independent Expenditures				13000.00	
(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.					
Crosby, Caleb, , Signature			[Electronically Filed] Date MM / DD / YYYY 09 / 22 / 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1416 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Advantage Inc			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 29 / 2022		
Mailing Address 9420 Bonita Beach Road SE Suite 200			Amount 55799.84		
City Bonita Springs		State FL	Zip Code 34135		Transaction ID : SE.282
Purpose of Expenditure Phone Calls		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 30 / 2022	
Name of Federal Candidate: Mowers, Matt, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President <input type="checkbox"/> State: NH		
Calendar Year-To-Date Per Election for Office Sought			495888.94 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Big Dog Strategies, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 30 / 2022		
Mailing Address 23510 Fashion Dr Ste 231			Amount 31406.73		
City Estero		State FL	Zip Code 33928		Transaction ID : SE.283
Purpose of Expenditure Direct Mail		Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 30 / 2022	
Name of Federal Candidate: Mowers, Matt, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President <input type="checkbox"/> State: NH		
Calendar Year-To-Date Per Election for Office Sought			527295.67 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			87206.57		
(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.					
Crosby, Caleb, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1417 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 / 31 / 2022 </div>		
Mailing Address PO Box 1051					
City New Albany	State OH	Zip Code 43054	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">407369.59</div>		
Purpose of Expenditure Media Placement			Category/ Type 004	Transaction ID : SE.284 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 / 30 / 2022 </div>	
Name of Federal Candidate: Pappas, Chris, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 934665.26			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶					

Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 / 31 / 2022 </div>		
Mailing Address PO Box 1051					
City New Albany	State OH	Zip Code 43054	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">407369.60</div>		
Purpose of Expenditure Media Placement			Category/ Type 004	Transaction ID : SE.285 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> MM / DD / YYYY </div> <div style="display: flex; justify-content: space-between;"> 08 / 30 / 2022 </div>	
Name of Federal Candidate: Mowers, Matt, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1342034.86			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶					

(a) SUBTOTAL of Itemized Independent Expenditures	▶	814739.19
(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.

Crosby, Caleb, ,

[Electronically Filed]

Date

MM / DD / YYYY

09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1418 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item Arena LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2022	
Mailing Address 1260 Stringham Ave #350				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">34500.00</div>	
City Salt Lake City		State UT		Zip Code 84106	
Purpose of Expenditure Digital Placement				Category/Type 004	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Mowers, Matt, ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President State: NH	
Calendar Year-To-Date Per Election for Office Sought 1376534.86				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Arena LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2022	
Mailing Address 1260 Stringham Ave #350				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">34500.00</div>	
City Salt Lake City		State UT		Zip Code 84106	
Purpose of Expenditure Digital Placement				Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Pappas, Chris, ,				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President State: NH	
Calendar Year-To-Date Per Election for Office Sought 1411034.86				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">69000.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
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.					
Signature <u>Crosby, Caleb, , ,</u>				Date MM / DD / YYYY 09 / 22 / 2022	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1419 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Advantage Inc	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>
Mailing Address 9420 Bonita Beach Road SE Suite 200	Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">14199.84</div>
City Bonita Springs State FL Zip Code 34135	Transaction ID : SE.288 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>
Purpose of Expenditure Phone Calls Category/Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Mowers, Matt, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1425234.70</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Arena LLC	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>
Mailing Address 1260 Stringham Ave #350	Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">34500.00</div>
City Salt Lake City State UT Zip Code 84106	Transaction ID : SE.289 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>
Purpose of Expenditure Digital Placement Category/Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Mowers, Matt, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NH
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1459734.70</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">48699.84</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

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

M M M /

D D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1420 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 300px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee Arena LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 1260 Stringham Ave #350			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">34500.00</div>		
City Salt Lake City	State UT	Zip Code 84106	Transaction ID : SE.290 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Digital Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: Pappas, Chris, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NH		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1494234.70</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FlexPoint Media INC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">430533.91</div>		
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.291 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Media Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: Pappas, Chris, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NH		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1924768.61</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">465033.91</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>		
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>		
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.					
Signature Crosby, Caleb, , ,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1421 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item FlexPoint Media INC				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 1051				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">430533.91</div>	
City New Albany		State OH		Zip Code 43504	
Purpose of Expenditure Media Placement				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Mowers, Matt, ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2355302.52</div>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Advantage Inc				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 9420 Bonita Beach Road SE Suite 200				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14199.84</div>	
City Bonita Springs		State FL		Zip Code 34135	
Purpose of Expenditure PHone Calls				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: Mowers, Matt, ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2369502.36</div>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">444733.75</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (b) SUBTOTAL of Unitemized Independent Expenditures..... </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (c) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
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.					
Signature <u>Crosby, Caleb, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1422 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund				FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee OnMessage, Inc <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 11 / 2022		
Mailing Address 817 Slaters Lane			Amount 2500.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.294		
Purpose of Expenditure Media Production		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 10 / 2022		
Name of Federal Candidate: Mowers, Matt, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought 2372002.36			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee OnMessage, Inc <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 11 / 2022		
Mailing Address 817 Slaters Lane			Amount 2500.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.295		
Purpose of Expenditure Media Production		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 10 / 2022		
Name of Federal Candidate: Pappas, Chris, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought 2374502.36			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			5000.00		
(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.					
Signature <i>Crosby, Caleb, , ,</i>		[Electronically Filed]		Date MM / DD / YYYY 09 / 22 / 2022	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1423 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Flexpoint Media Inc <input checked="" type="checkbox"/> Memo Item IE disseminated in current period but paid after. See schedule D			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022	
Mailing Address PO Box 1051			Amount 300.00	
City New Albany	State OH	Zip Code 43054	Transaction ID : SE.296	
Purpose of Expenditure Digital Production		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2022	
Name of Federal Candidate: Golden, Jared, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ME</u>	
Calendar Year-To-Date Per Election for Office Sought 1736641.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FlexPoint Media INC <input checked="" type="checkbox"/> Memo Item IE disseminated in current period but paid after. See schedule D			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 11 / 2022	
Mailing Address PO Box 1051			Amount 69075.56	
City New Albany	State OH	Zip Code 43504	Transaction ID : SE.297	
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2022	
Name of Federal Candidate: Gonzalez, Vicente, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>34</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought 814437.64			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
09 / 22 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1424 OF 1424
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00504530 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Advantage Inc IE disseminated in current period but paid after. See schedule D			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address 9420 Bonita Beach Road SE Suite 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14199.84</div>	
City Bonita Springs	State FL	Zip Code 34135	Transaction ID : SE.298 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone Calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Mowers, Matt, ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2388702.20</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item 			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address 			Amount <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Purpose of Expenditure 		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Name of Federal Candidate: 			Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input type="checkbox"/> Senate State:	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	27814296.78

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

M M /

D D /

Y Y Y Y Y

Signature