10/04/2020 20 : 41

## Image# 202010049285007583 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)		TIONES		PAGE	1 OF 1 OF FORM 24/48	
NAME OF COMMITTEE (In Full)						
Congressional Leadership Fund				C C0050453		
Check if 24-hour report 🗶 48-hour report	× New rep	ort Amends rep		M / D D	/ Y Y Y Y Y Y	
Full Name of Payee			Date	of Public Distribution		
RumbleUp				10 / D D 10 / D2	/ Y Y Y Y 2020	
Mailing Address 2021 L St. NW Suite 101-220			Amou	nt		
	State	Zip Code			5034.53	
Washington	DC	20036		Transaction ID : SE.001 Date of Disbursement or Obligation		
Purpose of Expenditure Text messages		Category/ Type 004		09 / D D 21	/ Y Y Y Y 2020	
Name of Federal Candidate		Support	Office Sough	t: 🗶 House	District: 05	
Webb, Cameron, , ,		× Oppose	Presid	ent Senate	State: VA	
Calendar Year-To-Date Per Election for Office Sought		263190.66	Disbursemer 2020	t For: Prima ther (specify) ▶	ary 🗶 General	
Full Name of Payee			Date	of Public Distributi	on/Dissemination	
			E P	M / D D	/ Y Y Y Y	
Mailing Address						
			Amou	nt		
City	State	Zip Code			,	
			Date	of Disbursement o	r Obligation	
Purpose of Expenditure		Category/ Type		I ■ M / D ■ D		
Name of Federal Candidate		Support	Office Soug	it: House	District:	
		Oppose	Presid	ent Senate	State:	
Calendar Year-To-Date			Disbursemer			
Per Election for Office Sought				ther (specify) ► _		
(a) SUBTOTAL of Itemized Independent Expenditures			··· •	-77	5034.53	
(b) SUBTOTAL of Uniternized Independent Expenditur	es			-77		
(c) TOTAL Independent Expenditures			···· ►		5034.53	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ac	or authorized					
Crosby, Caleb, , ,	<b>[F]</b> 4-	iaglly Filad	M M /		Y Y Y	
Signature	[Electron	<i>ically Filed]</i> Dat	te 10	04 2	2020	