

# 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  
Washington DC 20006  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00504530 3. IS THIS REPORT  NEW (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)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D 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 M / D D D / Y Y Y Y Y Y in the State of DC

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2014 through 11 / 24 / 2014

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

Type or Print Name of Treasurer Caleb Crosby

Signature of Treasurer Caleb Crosby [Electronically Filed] Date 12 / 04 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Congressional Leadership Fund

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="873361.48"/>	<input type="text" value="873361.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3273263.44"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="447359.76"/>	<input type="text" value="11500349.77"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3720623.20"/>	<input type="text" value="12373711.25"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3033561.54"/>	<input type="text" value="11686649.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="687061.66"/>	<input type="text" value="687061.66"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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. 06/2004)

Write or Type Committee Name

**Congressional Leadership Fund**

Report Covering the Period: From:  /  /  To:  /  /

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).....	257159.76	11095421.38
(ii) Unitemized .....	200.00	420.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	257359.76	11095841.88
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	190000.00	404507.89
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	447359.76	11500349.77
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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.).....	0.00	0.00
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))..... ▶	447359.76	11500349.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	447359.76	11500349.77

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	-3650132.19	1744794.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	-3650132.19	1744794.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	50000.00
24. Independent Expenditures (use Schedule E) .....	6683693.73	9891855.48
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	3033561.54	11686649.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3033561.54	11686649.59

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	447359.76	11500349.77
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	447359.76	11500349.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	-3650132.19	1744794.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-3650132.19	1744794.11

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Please note that in some instances, an independent expenditure reported using a single entry on a 24 Hour notice has been broken down into two entries on Schedule E of the report which represent the two separate payments made to the vendor for that independent expenditure. A short explanation has been provided in the additional text under the vendor name of several of these entries. In addition, the \$47,900.07 payment to Push Digital made on 10/1/14 for an independent expenditure disseminated on 10/21/14 corresponds to an entry on a notice filed on 10/22/14 with a dollar amount of \$50,000. Because the vendor applied a credit, CLF only paid \$47,900.07.

Form/Schedule:  
Transaction ID:

**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 80  
(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 (Last, First, Middle Initial)  
**A. LEON D. BLACK**  
 Mailing Address 9 W 57TH ST  
 FL 43  
 City NEW YORK State NY Zip Code 10019-2700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer APOLLO GLOBAL MANAGEMENT Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2014  
**Transaction ID : SA11.917**  
 Amount of Each Receipt this Period  
 100000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. HARRY LUCAS JR.**  
 Mailing Address 327 CONGRESS AVE., SUITE 500  
 City AUSTIN State TX Zip Code 78701-3656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LUCAS PETROLEUM GROUP Occupation CHAIRMAN AND CEO  
 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  
 10 / 27 / 2014  
**Transaction ID : SA11.919**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. FLORENCE F. WHEELER**  
 Mailing Address 10 N. MAYFLOWER RD.  
 City LAKE FOREST State IL Zip Code 60045-2421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 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  
 10 / 27 / 2014  
**Transaction ID : SA11.920**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110000.00  
**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 8 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. SAMUEL ZELL**

Mailing Address **2 N. RIVERSIDE PLAZA #600**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60606-2627</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>EQUITY GROUP INVESTMENTS</b>	Occupation <b>CHAIRMAN</b>
---	-------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**10000.00**

Date of Receipt  
**10 / 30 / 2014**

**Transaction ID : SA11.921**

Amount of Each Receipt this Period  
**10000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. LUCY C. STITZER**

Mailing Address **290 ROUND HILL RD.**

City <b>GREENWICH</b>	State <b>CT</b>	Zip Code <b>06831-3360</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>WAYCROSSE, INC.</b>	Occupation <b>CHAIRMAN</b>
--	-------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**27650.00**

Date of Receipt  
**10 / 31 / 2014**

**Transaction ID : SA11.923**

Amount of Each Receipt this Period  
**27650.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MARK STITZER**

Mailing Address **290 ROUND HILL RD.**

City <b>GREENWICH</b>	State <b>CT</b>	Zip Code <b>06831-3360</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>HAMLIN CAPITAL MANAGEMENT LLC</b>	Occupation <b>MANAGING PARTNER</b>
--	---------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**27650.00**

Date of Receipt  
**10 / 31 / 2014**

**Transaction ID : SA11.922**

Amount of Each Receipt this Period  
**27650.00**

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>65300.00</b>
<b>TOTAL</b> This Period (last 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 9 OF 80  
(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 (Last, First, Middle Initial)  
**A. KEVIN CANNON**

Mailing Address 8 FOX RUN DR.

City EASTON State CT Zip Code 06612-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer ZWEIGG-DIMENNA ASSOCIATES Occupation CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2014  
**Transaction ID : SA11.925**

Amount of Each Receipt this Period  
8500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOSEPH A. DIMENNA**

Mailing Address 10 EAST 67TH ST.

City NEW YORK State NY Zip Code 10065-5805

FEC ID number of contributing federal political committee. **C**

Name of Employer ZWEIG-DIMENNA ASSOCIATES Occupation FINANCE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2014  
**Transaction ID : SA11.924**

Amount of Each Receipt this Period  
8500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DESERET POWER ELECTRIC COOPERATIVE**

Mailing Address 10714 SOUTH JORDAN GATEWAY

City SOUTH JORDAN State UT Zip Code 84095-3922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2014  
**Transaction ID : SA11.927**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 22000.00

**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 10 OF 80
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. ERNESTO CRUZ**

Mailing Address 161 HUDSON ST. #4A

City NEW YORK State NY Zip Code 10013-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer CREDIT SUISSE Occupation BANKING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8750.00

Date of Receipt  
11 / 13 / 2014  
**Transaction ID : SA11.928**

Amount of Each Receipt this Period  
8750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JCB INC.**

Mailing Address 2000 BAMFORD BLVD.

City POOLER State GA Zip Code 31322-9504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
11 / 19 / 2014  
**Transaction ID : SA11.929**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. American Action Network**

Mailing Address 1747 Pennsylvania Ave. NW  
5th Floor

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273871.38

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : SB.158**

Amount of Each Receipt this Period  
48609.76

Contribution in kind - payroll/office space

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	59859.76
<b>TOTAL</b> This Period (last page this line number only).....▶	257159.76

**SCHEDULE 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 11 OF 80
<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

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC**

Mailing Address 1061 AMERICAN LANE

City State Zip Code  
SCHAUMBURG IL 60173-4973

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 16 / 2014  
**Transaction ID : SA11.916**

Amount of Each Receipt this Period  
150000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ENDING SPENDING ACTION FUND**

Mailing Address 610 S. BOULEVARD

City State Zip Code  
TAMPA FL 33606-2693

FEC ID number of contributing federal political committee. **C** C00489856

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2014  
**Transaction ID : SA11.926**

Amount of Each Receipt this Period  
40000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	190000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	190000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. America Rising LLC**

Mailing Address 138 Conant St., 1st Fl.

City State Zip Code  
Beverly MA 01915

Purpose of Disbursement  
Research consulting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.9**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.43**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**C. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.44**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.50**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**B. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.52**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**C. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.61**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Piccirilli Dorsey**

Mailing Address 502 Rock Spring Rd

City Bel Air State MD Zip Code 21014

Purpose of Disbursement  
Web hosting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.16**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Public Opinion Strategies LLC**

Mailing Address 214 North Fayette Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.22**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.55**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Epiphany Productions, Inc.**

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Fundraising consulting

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2014

Transaction ID : **SB.3**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. Linden Media LLC**

Mailing Address 705 Chetworth PL

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Research consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2014

Transaction ID : **SB.10**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Public Opinion Strategies LLC**

Mailing Address 214 North Fayette Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

005

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2014

Transaction ID : **SB.23**

Amount of Each Disbursement this Period

16500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

36500.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Public Opinion Strategies LLC**

Mailing Address 214 North Fayette Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

**005**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.25**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. The Tarrance Group**

Mailing Address 201 N. Union St, Suite 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

**005**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.24**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. The Tarrance Group**

Mailing Address 201 N. Union St, Suite 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

**005**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.26**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. American Media & Advocacy Group**

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement TV/Media placement

004

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2014

Transaction ID : SB.39

Amount of Each Disbursement this Period

-862514.00

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**B. American Media & Advocacy Group**

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement TV/Media placement

004

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2014

Transaction ID : SB.42

Amount of Each Disbursement this Period

-464969.52

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**C. American Media & Advocacy Group**

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement TV/Media placement

004

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2014

Transaction ID : SB.49

Amount of Each Disbursement this Period

-1284051.52

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

-2611535.04

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. American Media & Advocacy Group**

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
TV/Media placement

004

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2014

**Transaction ID : SB.60**

Amount of Each Disbursement this Period

-177940.48

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**B. American Media & Advocacy Group**

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
TV/Media placement

004

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2014

**Transaction ID : SB.63**

Amount of Each Disbursement this Period

-572925.20

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**C. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement  
Direct mail

004

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2014

**Transaction ID : SB.45**

Amount of Each Disbursement this Period

-4040.00

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

-754905.68

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Arena Communications

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB.51**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

### B. Arena Communications

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB.53**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

### C. Arena Communications

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB.62**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. IMGE LLC**

Mailing Address 603 King Street, 4th Floor

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital advertising

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /   
10 / 21 / 2014

**Transaction ID : SB.57**

Amount of Each Disbursement this Period

-52000.00

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**B. North Star Opinion Research, Inc.**

Mailing Address 112 North Alfred Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

**005**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /   
10 / 21 / 2014

**Transaction ID : SB.27**

Amount of Each Disbursement this Period

18500.00

Full Name (Last, First, Middle Initial)

**C. Public Opinion Strategies LLC**

Mailing Address 214 North Fayette Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

**005**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /   
10 / 21 / 2014

**Transaction ID : SB.28**

Amount of Each Disbursement this Period

22500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

-11000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Push Digital**

Mailing Address PO Box 7431

City Columbia State SC Zip Code 29202

Purpose of Disbursement  
Digital advertising

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.38**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**B. Push Digital**

Mailing Address PO Box 7431

City Columbia State SC Zip Code 29202

Purpose of Disbursement  
Digital advertising

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.58**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**C. Push Digital**

Mailing Address PO Box 7431

City Columbia State SC Zip Code 29202

Purpose of Disbursement  
Digital advertising

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.59**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Revolution Media Group LLC**

Mailing Address 1020 Princess Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Digital advertising

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 21 / 2014

**Transaction ID : SB.41**

Amount of Each Disbursement this Period

-39500.00

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**B. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement  
Direct mail

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 22 / 2014

**Transaction ID : SB.46**

Amount of Each Disbursement this Period

-1000.00

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**C. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City Salt Lake City State UT Zip Code 84104

Purpose of Disbursement  
Direct mail

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 22 / 2014

**Transaction ID : SB.54**

Amount of Each Disbursement this Period

-14789.00

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

-55289.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.56**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**B. North Star Opinion Research, Inc.**

Mailing Address 112 North Alfred Street

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Polling

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.29**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Arena Communications**

Mailing Address 1780 Sequoia Vista Circle

City State Zip Code  
Salt Lake City UT 84104

Purpose of Disbursement  
Direct mail

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.47**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Clark Hill PLC**

Mailing Address P.O. Box 3760

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement  
Strategy consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB.11**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. North Star Opinion Research, Inc.**

Mailing Address 112 North Alfred Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB.31**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. The Tarrance Group**

Mailing Address 201 N. Union St, Suite 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB.30**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Wiley Rein LLP**

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Legal services

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.14**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. American Media & Advocacy Group**

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
TV/Media placement

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.40**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

**C. Push Digital**

Mailing Address PO Box 7431

City Columbia State SC Zip Code 29202

Purpose of Disbursement  
Digital advertising

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.48**

Amount of Each Disbursement this Period

Independent expenditure previously reported as operating expenditure

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. FLS Connect, LLC**

Mailing Address 7300 Hudson Blvd, Suite 270

City St Paul State MN Zip Code 55128

Purpose of Disbursement  
Teleconference services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.17**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. First National Bank**

Mailing Address P.O. Box 2557

City Omaha State NE Zip Code 68103

Purpose of Disbursement  
Credit card payment - see memo entries

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.18**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Godaddy.com**

Mailing Address 14455 N. Hayden Rd., Ste. 226

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement  
Web domain name fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.35**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. First National Bank**

Mailing Address P.O. Box 2557

City Omaha State NE Zip Code 68103

Purpose of Disbursement  
Credit card payment - computer services

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /   
10 / 31 / 2014

**Transaction ID : SB.19**

Amount of Each Disbursement this Period

99.00

Full Name (Last, First, Middle Initial)

**B. North Star Opinion Research, Inc.**

Mailing Address 112 North Alfred Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Polling

**005**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /   
10 / 31 / 2014

**Transaction ID : SB.32**

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**C. PCI Payment Solutions**

Mailing Address 902 Chinquapin

City McLean State VA Zip Code 22102

Purpose 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

/  /   
11 / 03 / 2014

**Transaction ID : SB.4**

Amount of Each Disbursement this Period

319.54

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

12918.54

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Jacqueline Bond**

Mailing Address 1747 Pennsylvania Ave. NW  
5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**002**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB.33**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Capitol Computer Exchange**

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement  
Computer services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB.20**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Capitol Computer Exchange**

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement  
Computer services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB.21**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. CMDI**

Mailing Address 1593 Spring Hill Road, Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement  
Donor database subscription

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2014

Transaction ID : SB.13

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Linden Media LLC**

Mailing Address 705 Chetworth PL

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Research consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2014

Transaction ID : SB.12

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Trinity Financial Reporting & Compliance**

Mailing Address 13051 Farthingale Dr.

City Oak Hill State VA Zip Code 20171

Purpose of Disbursement  
Accounting and compliance

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2014

Transaction ID : SB.15

Amount of Each Disbursement this Period

15225.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

20725.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Honold Communications, Inc.**

Mailing Address 630 Browns Court, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Media consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.6**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. RedPrint Strategy LLC**

Mailing Address 311 S. Fillmore St.

City Arlington State VA Zip Code 22204

Purpose of Disbursement  
Media consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.5**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Something Else Strategies, LLC**

Mailing Address 212 Golden Willow Ct.

City Easley State SC Zip Code 29642

Purpose of Disbursement  
Media consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.7**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Daniel Conston**

Mailing Address 1747 Pennsylvania Ave. NW  
5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Travel - see memo entries

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.34**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Enterprise Rental Car**

Mailing Address 600 Corporate Park Drive

City St. Louis State MO Zip Code 63105

Purpose of Disbursement  
Ground transportation

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.36**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 111 W. Rio Salado Pkwy

City Tempe State AZ Zip Code 85281

Purpose of Disbursement  
Airfare

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB.37**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 McLean State VA Zip Code 22101

Purpose 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	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	1	4

Transaction ID : SB.2

Amount of Each Disbursement this Period

1	2	1	9	.	3	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. dmm Media, LLC**

Mailing Address 1911 N. Fort Myer Drive  
Suite 400

City Arlington State VA Zip Code 22209

Purpose of Disbursement  
Media consulting

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	0		2	0	1	4

Transaction ID : SB.8

Amount of Each Disbursement this Period

1	0	6	5	2	8	.	3	7
---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. American Action Network**

Mailing Address 1747 Pennsylvania Ave. NW  
5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Contribution in kind-payroll/office space

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	4

Transaction ID : SB.1

Amount of Each Disbursement this Period

4	8	6	0	9	.	7	6
---	---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1	5	6	3	5	7	.	5	0
---	---	---	---	---	---	---	---	---

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

-	3	6	5	0	1	3	2	.	1	9
---	---	---	---	---	---	---	---	---	---	---



**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Defending Main Street Super PAC**

Mailing Address 325 7th Street NW, Suite 610

City Washington State DC Zip Code 20004

Purpose of Disbursement  
In-kind contribution for advertising production cost

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB.159**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 34 OF 80
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>dmm Media</b>	Nature of Debt (Purpose): Online production
Mailing Address 1911 N. Ft. Myer Drive Suite 400	
City State Zip Code Arlington VA 22209	

Outstanding Balance Beginning This Period <input type="text" value="4982.16"/>	<b>Transaction ID : SB.160</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4982.16"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Majority Strategies</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 26 / 2014
Mailing Address 135 Professional Drive, Suite 104	Amount <span style="border: 1px solid black; padding: 2px;">24014.32</span>
City State Zip Code Ponte Vedra Beach FL 32082	<b>Transaction ID : SB.64</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 16 / 2014
Purpose of Expenditure Mobile advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Julia Brownley	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>26</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">433561.48</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Arena Communications</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 23 / 2014
Mailing Address 1780 Sequoia Vista Circle	Amount <span style="border: 1px solid black; padding: 2px;">21124.00</span>
City State Zip Code Salt Lake City UT 84104	<b>Transaction ID : SB.65</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 16 / 2014
Purpose of Expenditure Direct mail	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Julia Brownley	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>26</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">394758.16</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">45138.32</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caleb Crosby* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Arena Communications</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 21 / 2014</b>
Mailing Address <b>1780 Sequoia Vista Circle</b>	Amount <span style="margin-left: 20px;">13495.00</span>
City <b>Salt Lake City</b> State <b>UT</b> Zip Code <b>84104</b>	<b>Transaction ID : SB.66</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2014</b>
Purpose of Expenditure <b>Direct mail</b> Category/Type <b>004</b>	Name of Federal Candidate <b>Ami Bera</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <b>07</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">950904.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>American Media &amp; Advocacy Group</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 21 / 2014</b>
Mailing Address <b>815 Slaters Lane</b>	Amount <span style="margin-left: 20px;">42303.20</span>
City <b>Alexandria</b> State <b>VA</b> Zip Code <b>22314</b>	<b>Transaction ID : SB.67</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 16 / 2014</b>
Purpose of Expenditure <b>Radio placement</b> Category/Type <b>004</b>	Name of Federal Candidate <b>Ron Barber</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AZ</b>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">998831.60</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">55798.20</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

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.

*Caleb Crosby* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**12 / 04 / 2014**

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Arena Communications
Mailing Address
1780 Sequoia Vista Circle
City
Salt Lake City State
UT Zip Code
84104
Purpose of Expenditure
Direct mail Category/
Type 004
Name of Federal Candidate
Ron Barber Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1019936.60

Date of Public Distribution/Dissemination
10 / 22 / 2014
Amount
21105.00
Transaction ID : SB.68
Date of Disbursement or Obligation
10 / 17 / 2014
Office Sought:
House District: 02
Senate State: AZ
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Arena Communications
Mailing Address
1780 Sequoia Vista Circle
City
Salt Lake City State
UT Zip Code
84104
Purpose of Expenditure
Direct mail Category/
Type 004
Name of Federal Candidate
Julia Brownley Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
409547.16

Date of Public Distribution/Dissemination
10 / 24 / 2014
Amount
14789.00
Transaction ID : SB.69
Date of Disbursement or Obligation
10 / 17 / 2014
Office Sought:
House District: 26
Senate State: CA
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 35894.00
(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.

Caleb Crosby
[Electronically Filed]
Date 12 / 04 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Majority Strategies
Mailing Address
135 Professional Drive, Suite 104
City
Ponte Vedra Beach
State
FL
Zip Code
32082
Date of Public Distribution/Dissemination
10 / 28 / 2014
Amount
14249.84
Transaction ID : SB.70
Date of Disbursement or Obligation
10 / 17 / 2014
Purpose of Expenditure
Mobile advertising
Category/Type
004
Name of Federal Candidate
John Foust
Support
Oppose
Office Sought:
House
District: 10
State: VA
Disbursement For:
Primary
General
2014
Calendar Year-To-Date
Per Election for Office Sought
1049830.45

Full Name of Payee
Arena Communications
Mailing Address
1780 Sequoia Vista Circle
City
Salt Lake City
State
UT
Zip Code
84104
Date of Public Distribution/Dissemination
10 / 16 / 2014
Amount
5623.00
Transaction ID : SB.71
Date of Disbursement or Obligation
10 / 18 / 2014
Purpose of Expenditure
Direct mail
Category/Type
004
Name of Federal Candidate
John Foust
Support
Oppose
Office Sought:
House
District: 10
State: VA
Disbursement For:
Primary
General
2014
Calendar Year-To-Date
Per Election for Office Sought
976241.61

(a) SUBTOTAL of Itemized Independent Expenditures..... 19872.84
(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.
Caleb Crosby
[Electronically Filed]
Date
12 / 04 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arena Communications</b> <small>Combined with 10/10 payment of \$4040 on 24 hr notice filed 10/22</small>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 1780 Sequoia Vista Circle		Amount 5623.00	
City Salt Lake City	State UT	Zip Code 84104	<b>Transaction ID : SB.72</b>
Purpose of Expenditure Direct mail	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 18 / 2014	
Name of Federal Candidate John Foust		<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: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

985904.61

Full Name of Payee <b>Political Ink, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 1220 19th Street NW, Suite 502		Amount 33084.23	
City Washington	State DC	Zip Code 20036	<b>Transaction ID : SB.73</b>
Purpose of Expenditure Direct mail	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 20 / 2014	
Name of Federal Candidate Carol Shea-Porter		<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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

1440547.75

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	38707.23
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> 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.

*Caleb Crosby*  
Signature

[Electronically Filed]

Date    MM / DD / YYYY  
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Political Ink, Inc.

Date of Public Distribution/Dissemination 10 / 21 / 2014

Mailing Address 1220 19th Street NW, Suite 502

Amount 41549.03

City Washington State DC Zip Code 20036

Transaction ID : SB.74

Purpose of Expenditure Direct mail Category/Type 004

Date of Disbursement or Obligation 10 / 20 / 2014

Name of Federal Candidate Lynn Jenkins Support Oppose

Office Sought: House District: 02 State: KS

Calendar Year-To-Date Per Election for Office Sought 41549.03

Disbursement For: Primary General 2014

Full Name of Payee dmm Media

Date of Public Distribution/Dissemination 10 / 15 / 2014

Mailing Address 1911 N. Fort Myer Drive, Suite 400

Amount 4982.16

City Arlington State VA Zip Code 22209

Transaction ID : SB.75

Purpose of Expenditure Online production Category/Type 004

Date of Disbursement or Obligation 10 / 20 / 2014

Name of Federal Candidate Julia Brownley Support Oppose

Office Sought: House District: 26 State: CA

Calendar Year-To-Date Per Election for Office Sought 322932.16

Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 46531.19

(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.

Caleb Crosby
Signature

[Electronically Filed]

Date 12 / 04 / 2014



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Scott Howell & Company
Mailing Address: 3900 Willow St., Suite 200
City: Dallas, State: TX, Zip Code: 75226
Purpose of Expenditure: TV/media production
Category/Type: 004
Date of Public Distribution/Dissemination: 10/21/2014
Amount: 21000.00
Transaction ID: SB.76
Date of Disbursement or Obligation: 10/20/2014
Name of Federal Candidate: Ami Bera
Office Sought: House, District: 07, State: CA
Disbursement For: General 2014
Calendar Year-To-Date Per Election for Office Sought: 950904.00

Full Name of Payee: Rose, Moser, Allyn Public & Online Relations
Mailing Address: 7144 E. Stetson Drive, Suite 400
City: Scottsdale, State: AZ, Zip Code: 85251
Purpose of Expenditure: Media production
Category/Type: 004
Date of Public Distribution/Dissemination: 10/21/2014
Amount: 5000.00
Transaction ID: SB.77
Date of Disbursement or Obligation: 10/21/2014
Name of Federal Candidate: Ron Barber
Office Sought: House, District: 02, State: AZ
Disbursement For: General 2014
Calendar Year-To-Date Per Election for Office Sought: 998831.60

(a) SUBTOTAL of Itemized Independent Expenditures: 26000.00
(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: Caleb Crosby
Date: 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Arena Communications
Mailing Address
1780 Sequoia Vista Circle
City
Salt Lake City
State
UT
Zip Code
84104
Purpose of Expenditure
Direct mail
Category/Type
004
Name of Federal Candidate
John Foust
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1007172.61

Date of Public Distribution/Dissemination
10 / 22 / 2014
Amount
20268.00
Transaction ID : SB.78
Date of Disbursement or Obligation
10 / 21 / 2014
Office Sought:
House
District: 10
State: VA
Disbursement For:
General
2014

Full Name of Payee
Arena Communications
Mailing Address
1780 Sequoia Vista Circle
City
Salt Lake City
State
UT
Zip Code
84104
Purpose of Expenditure
Direct mail
Category/Type
004
Name of Federal Candidate
John Foust
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1028440.61

Date of Public Distribution/Dissemination
10 / 24 / 2014
Amount
20268.00
Transaction ID : SB.79
Date of Disbursement or Obligation
10 / 21 / 2014
Office Sought:
House
District: 10
State: VA
Disbursement For:
General
2014

(a) SUBTOTAL of Itemized Independent Expenditures 40536.00
(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: Caleb Crosby
[Electronically Filed]
Date: 12 / 04 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Scott Howell &amp; Company</b> <small>Combined with 10/22 payment of \$900 on 24 hr notice filed 10/22</small>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2014
Mailing Address 3900 Willow St., Suite 200	Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>
City Dallas State TX Zip Code 75226	<b>Transaction ID : SB.80</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2014
Purpose of Expenditure TV/media production	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Gwen Graham	<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: FL
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">536969.52</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>American Media &amp; Advocacy Group</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2014
Mailing Address 815 Slaters Lane	Amount <span style="border: 1px solid black; padding: 2px;">4412.00</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SB.81</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2014
Purpose of Expenditure TV/media placement	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Carol Shea-Porter	<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 <span style="border: 1px solid black; padding: 2px;">1440547.75</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">24412.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caleb Crosby*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 04 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>IMGE LLC</b>	Date of Public Distribution/Dissemination 10 / 28 / 2014
Mailing Address 603 King Street, 4th Floor	Amount 45000.00
City Alexandria	State VA
Zip Code 22314	<b>Transaction ID : SB.82</b>
Purpose of Expenditure Digital advertising	Date of Disbursement or Obligation 10 / 21 / 2014
Category/Type 004	Name of Federal Candidate Bill Enyart
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 12 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: IL
Calendar Year-To-Date Per Election for Office Sought 472581.60	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Something Else Strategies</b>	Date of Public Distribution/Dissemination 10 / 21 / 2014
Mailing Address 212 Golden Willow Ct.	Amount 53975.00
City Easley	State SC
Zip Code 29642	<b>Transaction ID : SB.83</b>
Purpose of Expenditure TV/media production	Date of Disbursement or Obligation 10 / 21 / 2014
Category/Type 004	Name of Federal Candidate Ron Barber
<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: AZ
Calendar Year-To-Date Per Election for Office Sought 1001456.60	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	98975.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> 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.

Caleb Crosby

Signature \_\_\_\_\_ [Electronically Filed] Date 12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
American Media & Advocacy Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Date of Public Distribution/Dissemination
10 / 28 / 2014
Amount
396292.64
Transaction ID : SB.84
Date of Disbursement or Obligation
10 / 21 / 2014
Purpose of Expenditure
TV/media placement Category/Type
004
Name of Federal Candidate
Collin Peterson Support Oppose
Office Sought: House District: 07
President Senate State: MN
Calendar Year-To-Date
Per Election for Office Sought
457998.64
Disbursement For: Primary General
2014 Other (specify)

Full Name of Payee
Something Else Strategies
Mailing Address
212 Golden Willow Ct.
City
Easley State
SC Zip Code
29642
Date of Public Distribution/Dissemination
10 / 21 / 2014
Amount
21450.00
Transaction ID : SB.85
Date of Disbursement or Obligation
10 / 21 / 2014
Purpose of Expenditure
TV/media production Category/Type
004
Name of Federal Candidate
Carol Shea-Porter Support Oppose
Office Sought: House District: 01
President Senate State: NH
Calendar Year-To-Date
Per Election for Office Sought
1442997.75
Disbursement For: Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 417742.64
(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.
Caleb Crosby [Electronically Filed] Date 12 / 04 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>dmm Media</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 25 / 2014</b>
Mailing Address 1911 N. Fort Myer Drive, Suite 400	Amount <span style="margin-left: 20px;">19030.32</span>
City State Zip Code <b>Arlington VA 22209</b>	<b>Transaction ID : SB.86</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 21 / 2014</b>
Purpose of Expenditure TV/media production	Category/Type <span style="margin-left: 20px;">004</span>
Name of Federal Candidate <b>Pete Gallego</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">1047903.63</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Arena Communications</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 24 / 2014</b>
Mailing Address 1780 Sequoia Vista Circle	Amount <span style="margin-left: 20px;">21105.00</span>
City State Zip Code <b>Salt Lake City UT 84104</b>	<b>Transaction ID : SB.87</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 22 / 2014</b>
Purpose of Expenditure Direct mail	Category/Type <span style="margin-left: 20px;">004</span>
Name of Federal Candidate <b>Ron Barber</b>	<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>AZ</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">1041041.60</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">40135.32</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

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.

*Caleb Crosby* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**12 / 04 / 2014**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>American Media &amp; Advocacy Group</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2014
Mailing Address 815 Slaters Lane	Amount <span style="border: 1px solid black; padding: 2px;">59863.00</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SB.88</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2014
Purpose of Expenditure TV/media placement	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Seth Moulton	<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: MA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">74720.09</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>American Media &amp; Advocacy Group</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Mailing Address 815 Slaters Lane	Amount <span style="border: 1px solid black; padding: 2px;">380112.20</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SB.89</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2014
Purpose of Expenditure TV/media placement	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Seth Moulton	<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: MA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">469832.29</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">439975.20</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caleb Crosby* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 04 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>American Media &amp; Advocacy Group</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Mailing Address 815 Slaters Lane	Amount <span style="border: 1px solid black; padding: 2px;">43956.00</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SB.90</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 22 / 2014
Purpose of Expenditure TV/media placement	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Collin Peterson	<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: MN
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">457998.64</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>American Media &amp; Advocacy Group</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Mailing Address 815 Slaters Lane	Amount <span style="border: 1px solid black; padding: 2px;">407581.60</span>
City Alexandria State VA Zip Code 22314	<b>Transaction ID : SB.91</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 22 / 2014
Purpose of Expenditure TV/media placement	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Bill Enyart	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 12 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">472581.60</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">451537.60</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caleb Crosby* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 12 / 04 / 2014

Signature \_\_\_\_\_



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Scott Howell & Company
Combined with 10/20 payment of \$21000 on 24 hr notice filed 10/22

Date of Public Distribution/Dissemination
10 / 21 / 2014

Mailing Address
3900 Willow St., Suite 200

Amount
900.00
Transaction ID : SB.92

City State Zip Code
Dallas TX 75226

Date of Disbursement or Obligation
10 / 22 / 2014

Purpose of Expenditure
TV/Media production
Category/Type
004

Name of Federal Candidate
Ami Bera
Support Oppose

Office Sought: House District: 07
State: CA

Calendar Year-To-Date
Per Election for Office Sought
950904.00

Disbursement For: Primary General
2014

Full Name of Payee
Political Ink, Inc.

Date of Public Distribution/Dissemination
10 / 23 / 2014

Mailing Address
1220 19th Street NW, Suite 502

Amount
41511.92
Transaction ID : SB.93

City State Zip Code
Washington DC 20036

Date of Disbursement or Obligation
10 / 23 / 2014

Purpose of Expenditure
Direct mail
Category/Type
004

Name of Federal Candidate
Lynn Jenkins
Support Oppose

Office Sought: House District: 02
State: KS

Calendar Year-To-Date
Per Election for Office Sought
83060.95

Disbursement For: Primary General
2014

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 42411.92, (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: Caleb Crosby [Electronically Filed] Date: 12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Political Ink, Inc.
Mailing Address
1220 19th Street NW, Suite 502
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Direct mail Category/Type
004
Name of Federal Candidate
Carol Shea-Porter Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
1473500.98

Date of Public Distribution/Dissemination
10 / 23 / 2014
Amount
32953.23
Transaction ID : SB.94
Date of Disbursement or Obligation
10 / 23 / 2014
Office Sought:
House District: 01
Senate State: NH
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Honold Communications
Mailing Address
630 Browns Court, SE
City
Washington State
DC Zip Code
20003
Purpose of Expenditure
TV/media production Category/Type
004
Name of Federal Candidate
Seth Moulton Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
74720.09

Date of Public Distribution/Dissemination
10 / 25 / 2014
Amount
14857.09
Transaction ID : SB.95
Date of Disbursement or Obligation
10 / 24 / 2014
Office Sought:
House District: 06
Senate State: MA
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 47810.32
(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: Caleb Crosby [Electronically Filed] Date: 12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004
Date of Public Distribution/Dissemination 10/27/2014
Amount 3614.55
Transaction ID : SB.96
Date of Disbursement or Obligation 10/24/2014
Name of Federal Candidate Ron Barber Support Oppose
Office Sought: House District: 02 State: AZ
Disbursement For: Primary General 2014

Full Name of Payee
Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004
Date of Public Distribution/Dissemination 10/27/2014
Amount 3614.55
Transaction ID : SB.97
Date of Disbursement or Obligation 10/24/2014
Name of Federal Candidate Martha McSally Support Oppose
Office Sought: House District: 02 State: AZ
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 7229.10
(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.

Caleb Crosby [Electronically Filed] Date 12/04/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004
Date of Public Distribution/Dissemination 10/30/2014
Amount 3614.55
Transaction ID : SB.98
Date of Disbursement or Obligation 10/24/2014
Name of Federal Candidate Ron Barber Support Oppose Office Sought: House District: 02 State: AZ
Calendar Year-To-Date Per Election for Office Sought 1149552.08
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004
Date of Public Distribution/Dissemination 10/30/2014
Amount 3614.55
Transaction ID : SB.99
Date of Disbursement or Obligation 10/24/2014
Name of Federal Candidate Martha McSally Support Oppose Office Sought: House District: 02 State: AZ
Calendar Year-To-Date Per Election for Office Sought 1149552.08
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 7229.10
(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.

Caleb Crosby [Electronically Filed] Date 12/04/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004
Date of Public Distribution/Dissemination 11/03/2014
Amount 7229.10
Transaction ID : SB.100
Date of Disbursement or Obligation 10/24/2014
Name of Federal Candidate Martha McSally Support
Office Sought: House District: 02 State: AZ
Calendar Year-To-Date Per Election for Office Sought 1160781.18
Disbursement For: General 2014

Full Name of Payee
Political Ink, Inc.
Mailing Address 1220 19th Street NW, Suite 502
City Washington State DC Zip Code 20036
Purpose of Expenditure Direct mail Category/Type 004
Date of Public Distribution/Dissemination 10/24/2014
Amount 27908.89
Transaction ID : SB.101
Date of Disbursement or Obligation 10/24/2014
Name of Federal Candidate Lynn Jenkins Support
Office Sought: House District: 02 State: KS
Calendar Year-To-Date Per Election for Office Sought 110969.84
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 35137.99
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Caleb Crosby [Electronically Filed] Date 12/04/2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Connection Strategy</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2014
Mailing Address PO Box 2192	Amount <span style="border: 1px solid black; padding: 2px;">3570.00</span>
City State Zip Code Arlington VA 22202	<b>Transaction ID : SB.102</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2014
Purpose of Expenditure Telephone advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate John Foust	<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: VA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1035580.61</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Connection Strategy</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2014
Mailing Address PO Box 2192	Amount <span style="border: 1px solid black; padding: 2px;">3570.00</span>
City State Zip Code Arlington VA 22202	<b>Transaction ID : SB.103</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2014
Purpose of Expenditure Telephone advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Barbara Comstock	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1035580.61</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">7140.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caleb Crosby* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 04 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Connection Strategy</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 30 / 2014
Mailing Address PO Box 2192	Amount <span style="border: 1px solid black; padding: 2px;">7140.00</span>
City State Zip Code Arlington VA 22202	
Purpose of Expenditure Telephone advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Barbara Comstock	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2014
Name of Federal Candidate Barbara Comstock	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<span style="border: 1px solid black; padding: 2px;">1056970.45</span>	

Full Name of Payee <b>RedPrint Strategy</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Mailing Address 311 S. Fillmore St.	Amount <span style="border: 1px solid black; padding: 2px;">17750.00</span>
City State Zip Code Arlington VA 22204	
Purpose of Expenditure TV/media production	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Collin Peterson	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2014
Name of Federal Candidate Collin Peterson	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<span style="border: 1px solid black; padding: 2px;">457998.64</span>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">24890.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

Caleb Crosby

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 04 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>		FEC IDENTIFICATION NUMBER <b>C C00504530</b>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<input type="text"/> / <input type="text"/> / <input type="text"/>

Full Name of Payee <b>Push Digital</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>PO Box 7431</b>		Amount <input type="text"/>
City <b>Columbia</b>	State <b>SC</b>	Zip Code <b>29202</b>
Purpose of Expenditure <b>Digital advertising</b>		Transaction ID : <b>SB.106</b>
Category/Type <input type="text"/>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate <b>Seth Moulton</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MA</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
		<input type="text"/>

Full Name of Payee <b>Political Ink, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>1220 19th Street NW, Suite 502</b>		Amount <input type="text"/>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>
Purpose of Expenditure <b>Direct mail</b>		Transaction ID : <b>SB.107</b>
Category/Type <input type="text"/>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate <b>Lynn Jenkins</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KS</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
		<input type="text"/>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<input type="text"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) <b>TOTAL</b> 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.

Caleb Crosby [Electronically Filed] Date  /  /   
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Political Ink, Inc.
Mailing Address
1220 19th Street NW, Suite 502
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Direct mail Category/Type
004

Date of Public Distribution/Dissemination
10 / 28 / 2014
Amount
32953.23
Transaction ID : SB.108
Date of Disbursement or Obligation
10 / 27 / 2014

Name of Federal Candidate
Carol Shea-Porter
Support
Oppose
Office Sought:
House District: 01
President Senate State: NH

Disbursement For:
Primary General
2014 Other (specify)

Full Name of Payee
Something Else Strategies
Mailing Address
212 Golden Willow Ct.
City
Easley State
SC Zip Code
29642
Purpose of Expenditure
TV/media production Category/Type
004

Date of Public Distribution/Dissemination
10 / 28 / 2014
Amount
20050.00
Transaction ID : SB.109
Date of Disbursement or Obligation
10 / 27 / 2014

Name of Federal Candidate
Ron Barber
Support
Oppose
Office Sought:
House District: 02
President Senate State: AZ

Disbursement For:
Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 53003.23
(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.

Caleb Crosby
[Electronically Filed]
Date 12 / 04 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Scott Howell &amp; Company</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Mailing Address 3900 Willow St., Suite 200	Amount <span style="border: 1px solid black; padding: 2px;">19000.00</span>
City Dallas State TX Zip Code 75226	<b>Transaction ID : SB.110</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Purpose of Expenditure TV/media production	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Gwen Graham	<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: FL
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">555969.52</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RedPrint Strategy</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Mailing Address 311 S. Fillmore St.	Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>
City Arlington State VA Zip Code 22204	<b>Transaction ID : SB.111</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2014
Purpose of Expenditure TV/media production	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Bill Enyart	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 12 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">472581.60</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">39000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caleb Crosby*  
Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y  
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004
Name of Federal Candidate Brad Ashford Support Oppose Office Sought: House District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 8811.30
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004
Name of Federal Candidate Lee Terry Support Oppose Office Sought: House District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 17622.60
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 17622.60
(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 Caleb Crosby [Electronically Filed] Date 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004

Date of Public Distribution/Dissemination
11 / 03 / 2014
Amount 8811.30
Transaction ID : SB.116
Date of Disbursement or Obligation
10 / 30 / 2014

Name of Federal Candidate
Lee Terry
Support
Office Sought: House District: 02
State: NE

Disbursement For: Primary General
2014

Calendar Year-To-Date Per Election for Office Sought
26433.90

Full Name of Payee
Connection Strategy
Mailing Address PO Box 2192
City Arlington State VA Zip Code 22202
Purpose of Expenditure Telephone advertising Category/Type 004

Date of Public Distribution/Dissemination
11 / 04 / 2014
Amount 8811.30
Transaction ID : SB.117
Date of Disbursement or Obligation
10 / 30 / 2014

Name of Federal Candidate
Lee Terry
Support
Office Sought: House District: 02
State: NE

Disbursement For: Primary General
2014

Calendar Year-To-Date Per Election for Office Sought
35245.20

(a) SUBTOTAL of Itemized Independent Expenditures 17622.60
(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.

Caleb Crosby [Electronically Filed] Date 12 / 04 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Something Else Strategies
Mailing Address: 212 Golden Willow Ct.
City: Easley, State: SC, Zip Code: 29642
Purpose of Expenditure: Web video production, Category/Type: 004
Date of Public Distribution/Dissemination: 10/31/2014
Amount: 4000.00
Transaction ID: SB.118
Date of Disbursement or Obligation: 10/31/2014
Name of Federal Candidate: Martha McCally, Support
Office Sought: House, District: 02, State: AZ
Calendar Year-To-Date Per Election for Office Sought: 1160781.18
Disbursement For: General 2014

Full Name of Payee: Majority Strategies
Mailing Address: 135 Professional Drive, Suite 104
City: Ponte Vedra Beach, State: FL, Zip Code: 32082
Purpose of Expenditure: Mobile advertising, Category/Type: 004
Date of Public Distribution/Dissemination: 11/02/2014
Amount: 9294.12
Transaction ID: SB.119
Date of Disbursement or Obligation: 10/31/2014
Name of Federal Candidate: Bob Dold, Support
Office Sought: House, District: 10, State: IL
Calendar Year-To-Date Per Election for Office Sought: 950033.09
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 13294.12
(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.
Signature: Caleb Crosby
Date: 12/04/2014
[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Push Digital</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Mailing Address PO Box 7431	Amount <span style="border: 1px solid black; padding: 2px;">10000.00</span>
City State Zip Code Columbia SC 29202	<b>Transaction ID : SB.120</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 31 / 2014
Purpose of Expenditure Digital advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Barbara Comstock	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> President State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1066970.45</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Push Digital</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 31 / 2014
Mailing Address PO Box 7431	Amount <span style="border: 1px solid black; padding: 2px;">25000.00</span>
City State Zip Code Columbia SC 29202	<b>Transaction ID : SB.121</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 31 / 2014
Purpose of Expenditure Digital advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Seth Moulton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> President State: <u>MA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">494832.29</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">35000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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*Caleb Crosby*
[Electronically Filed]
Date M M M / D D D / Y Y Y Y Y Y  
12 / 04 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Push Digital
Mailing Address PO Box 7431
City Columbia State SC Zip Code 29202
Purpose of Expenditure Digital advertising Category/Type 004
Name of Federal Candidate Carol Shea-Porter Support Oppose
Office Sought: House District: 01 State: NH
Calendar Year-To-Date Per Election for Office Sought 1530454.21
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee
Third Dimension Strategies, LLC
Mailing Address 14524 Cantrell Road, Ste 140
City Little Rock State AR Zip Code 72223
Purpose of Expenditure Telephone advertising Category/Type 004
Name of Federal Candidate Bruce Poliquin Support Oppose
Office Sought: House District: 02 State: ME
Calendar Year-To-Date Per Election for Office Sought 35000.00
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 41500.00
(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.
Caleb Crosby [Electronically Filed] Date 12/04/2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Third Dimension Strategies, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2014
Mailing Address 14525 Cantrell Road, Ste 140	Amount <span style="border: 1px solid black; padding: 2px;">8750.00</span>
City State Zip Code Little Rock AR 72223	<b>Transaction ID : SB.124</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Purpose of Expenditure Telephone advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Emily Cain	<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 <span style="border: 1px solid black; padding: 2px;">35000.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Third Dimension Strategies, LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2014
Mailing Address 14526 Cantrell Road, Ste 140	Amount <span style="border: 1px solid black; padding: 2px;">8750.00</span>
City State Zip Code Little Rock AR 72223	<b>Transaction ID : SB.125</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Purpose of Expenditure Telephone advertising	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate Blaine Richardson	<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 <span style="border: 1px solid black; padding: 2px;">35000.00</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">17500.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Caleb Crosby* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 04 / 2014

Signature \_\_\_\_\_



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Citibank
Mailing Address P.O. Box 183037
City Columbus State OH Zip Code 43218
Purpose of Expenditure Credit card payment - see memo entry
Category/Type 004
Name of Federal Candidate Mike Coffman
Office Sought: House District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought 49990.00
Disbursement For: General 2014

Full Name of Payee First National Bank
Mailing Address P.O. Box 2557
City Omaha State NE Zip Code 68103
Purpose of Expenditure Credit card payment - see memo entry
Category/Type 004
Name of Federal Candidate Mike Coffman
Office Sought: House District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought 49990.00
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 2800.00
(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 Caleb Crosby [Electronically Filed] Date 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Facebook
MEMO ITEM Combined with 10/31 payment of \$603.79 on 24 hr notice filed 11/1
Mailing Address 1155 F Street NW
City Washington State DC Zip Code 20004
Purpose of Expenditure Digital advertising Category/Type 004
Name of Federal Candidate Mike Coffman Support Oppose
Calendar Year-To-Date Per Election for Office Sought 49990.00

Date of Public Distribution/Dissemination 10/31/2014
Amount 2196.21
Transaction ID : SB.128
Date of Disbursement or Obligation 10/31/2014
Office Sought: House District: 06 State: CO
Disbursement For: General 2014

Full Name of Payee
Facebook
MEMO ITEM Combined with 10/31 payment of \$2196.21 on 24 hr notice filed 11/1
Mailing Address 1155 F Street NW
City Washington State DC Zip Code 20004
Purpose of Expenditure Digital advertising Category/Type 004
Name of Federal Candidate Mike Coffman Support Oppose
Calendar Year-To-Date Per Election for Office Sought 49990.00

Date of Public Distribution/Dissemination 10/31/2014
Amount 603.79
Transaction ID : SB.129
Date of Disbursement or Obligation 10/31/2014
Office Sought: House District: 06 State: CO
Disbursement For: General 2014

(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.
Caleb Crosby [Electronically Filed] Date 12/04/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Push Digital
Mailing Address PO Box 7431
City Columbia State SC Zip Code 29202
Purpose of Expenditure Digital advertising Category/Type 004
Name of Federal Candidate Ron Barber Support Oppose
Calendar Year-To-Date Per Election for Office Sought 998831.60

Date of Public Distribution/Dissemination 10/21/2014
Amount 47900.07
Transaction ID : SB.130
Date of Disbursement or Obligation 10/01/2014
Office Sought: House District: 02 State: AZ
Disbursement For: General 2014

Full Name of Payee
American Media & Advocacy Group
Mailing Address 815 Slaters Lane
City Alexandria State VA Zip Code 22314
Purpose of Expenditure TV/Media placement Category/Type 004
Name of Federal Candidate Ami Bera Support Oppose
Calendar Year-To-Date Per Election for Office Sought 950904.00

Date of Public Distribution/Dissemination 10/21/2014
Amount 862514.00
Transaction ID : SB.131
Date of Disbursement or Obligation 10/07/2014
Office Sought: House District: 07 State: CA
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 910414.07
(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 Caleb Crosby [Electronically Filed] Date 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
American Media & Advocacy Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
TV/Media placement Category/
Type
004
Name of Federal Candidate
Pete Gallego Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1047903.63

Date of Public Distribution/Dissemination
10 / 25 / 2014
Amount
501008.80
Transaction ID : SB.132
Date of Disbursement or Obligation
10 / 09 / 2014
Office Sought:
House District: 23
State: TX
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Revolution
Mailing Address
1020 Princess Street
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Digital advertising Category/
Type
004
Name of Federal Candidate
Ami Bera Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
950904.00

Date of Public Distribution/Dissemination
10 / 21 / 2014
Amount
39500.00
Transaction ID : SB.133
Date of Disbursement or Obligation
10 / 09 / 2014
Office Sought:
House District: 07
State: CA
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 540508.80
(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.

Caleb Crosby
[Electronically Filed]
Date
12 / 04 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
American Media & Advocacy Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
TV/Media placement
Category/Type
004
Date of Public Distribution/Dissemination
10 / 21 / 2014
Amount
464969.52
Transaction ID : SB.134
Date of Disbursement or Obligation
10 / 10 / 2014
Name of Federal Candidate
Gwen Graham
Support
Oppose
Office Sought:
House District: 02
President Senate State: FL
Calendar Year-To-Date
Per Election for Office Sought
536969.52
Disbursement For:
Primary General
2014 Other (specify)

Full Name of Payee
Arena Communications
Mailing Address
1780 Sequoia Vista Circle
City
Salt Lake City State
UT Zip Code
84104
Purpose of Expenditure
Direct mail
Category/Type
004
Date of Public Distribution/Dissemination
10 / 16 / 2014
Amount
21124.00
Transaction ID : SB.135
Date of Disbursement or Obligation
10 / 10 / 2014
Name of Federal Candidate
Julia Brownley
Support
Oppose
Office Sought:
House District: 26
President Senate State: CA
Calendar Year-To-Date
Per Election for Office Sought
78161.00
Disbursement For:
Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 486093.52
(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.
Caleb Crosby
[Electronically Filed]
Date
12 / 04 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Arena Communications
Mailing Address: 1780 Sequoia Vista Circle
City: Salt Lake City, State: UT, Zip Code: 84104
Purpose of Expenditure: Direct mail, Category/Type: 004
Name of Federal Candidate: John Foust, Office Sought: House, District: 10, State: VA
Calendar Year-To-Date Per Election for Office Sought: 976241.61
Disbursement For: General 2014
Date of Public Distribution/Dissemination: 10/16/2014
Amount: 4040.00
Transaction ID: SB.136
Date of Disbursement or Obligation: 10/10/2014

Full Name of Payee: Arena Communications
Mailing Address: 1780 Sequoia Vista Circle
City: Salt Lake City, State: UT, Zip Code: 84104
Purpose of Expenditure: Direct mail, Category/Type: 004
Name of Federal Candidate: John Foust, Office Sought: House, District: 10, State: VA
Calendar Year-To-Date Per Election for Office Sought: 985904.61
Disbursement For: General 2014
Date of Public Distribution/Dissemination: 10/21/2014
Amount: 4040.00
Transaction ID: SB.137
Date of Disbursement or Obligation: 10/10/2014

(a) SUBTOTAL of Itemized Independent Expenditures: 8080.00
(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: Caleb Crosby [Electronically Filed] Date: 12/04/2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Arena Communications</b> <small>Reported as operating expenditure in period of disbursement</small>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 22 / 2014</b>
Mailing Address <b>1780 Sequoia Vista Circle</b>	Amount <span style="float:right">1000.00</span>
City <b>Salt Lake City</b> State <b>UT</b> Zip Code <b>84104</b>	<b>Transaction ID : SB.138</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 10 / 2014</b>
Purpose of Expenditure <b>Direct mail</b> Category/Type <b>004</b>	Name of Federal Candidate <b>John Foust</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <b>10</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>VA</b>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">1007172.61</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Arena Communications</b> <small>Reported as operating expenditure in period of disbursement</small>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 24 / 2014</b>
Mailing Address <b>1780 Sequoia Vista Circle</b>	Amount <span style="float:right">1000.00</span>
City <b>Salt Lake City</b> State <b>UT</b> Zip Code <b>84104</b>	<b>Transaction ID : SB.139</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>10 / 10 / 2014</b>
Purpose of Expenditure <b>Direct mail</b> Category/Type <b>004</b>	Name of Federal Candidate <b>John Foust</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <b>10</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>VA</b>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">1028440.61</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="float:right">2000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="float:right"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="float:right"></span>

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.

*Caleb Crosby* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**12 / 04 / 2014**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00504530
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Push Digital</b> <small>Reported as operating expenditure in period of disbursement</small>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 25 / 2014</b>
Mailing Address PO Box 7431	Amount <b>44835.00</b>
City State Zip Code <b>Columbia SC 29202</b>	<b>Transaction ID : SB.140</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 10 / 2014</b>
Purpose of Expenditure Digital advertising	Category/Type <b>004</b>
Name of Federal Candidate <b>Pete Gallego</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <b>23</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought <b>1047903.63</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>American Media &amp; Advocacy Group</b> <small>Reported as operating expenditure in period of disbursement</small>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 21 / 2014</b>
Mailing Address 815 Slaters Lane	Amount <b>1284051.52</b>
City State Zip Code <b>Alexandria VA 22314</b>	<b>Transaction ID : SB.141</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 14 / 2014</b>
Purpose of Expenditure TV/Media placement	Category/Type <b>004</b>
Name of Federal Candidate <b>Carol Shea-Porter</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>
Calendar Year-To-Date Per Election for Office Sought <b>1440547.75</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>1328886.52</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> 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.

*Caleb Crosby*  
Signature

[Electronically Filed] Date **12 / 04 / 2014**



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Arena Communications
Mailing Address 1780 Sequoia Vista Circle
City Salt Lake City State UT Zip Code 84104
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate Ami Bera
Calendar Year-To-Date Per Election for Office Sought 13495.00

Date of Public Distribution/Dissemination 10/16/2014
Amount 13495.00
Transaction ID : SB.142
Date of Disbursement or Obligation 10/14/2014
Office Sought: House District: 07 State: CA
Disbursement For: General 2014

Full Name of Payee Arena Communications
Mailing Address 1780 Sequoia Vista Circle
City Salt Lake City State UT Zip Code 84104
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate Julia Brownley
Calendar Year-To-Date Per Election for Office Sought 358845.16

Date of Public Distribution/Dissemination 10/21/2014
Amount 21124.00
Transaction ID : SB.143
Date of Disbursement or Obligation 10/14/2014
Office Sought: House District: 26 State: CA
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 34619.00
(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 Caleb Crosby [Electronically Filed] Date 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Arena Communications
Mailing Address 1780 Sequoia Vista Circle
City Salt Lake City State UT Zip Code 84104
Purpose of Expenditure Direct mail Category/Type 004
Date of Public Distribution/Dissemination 10/16/2014
Amount 14789.00
Transaction ID : SB.144
Date of Disbursement or Obligation 10/14/2014
Name of Federal Candidate Julia Brownley Support Oppose
Office Sought: House District: 26 State: CA
Disbursement For: Primary General 2014

Full Name of Payee Arena Communications
Mailing Address 1780 Sequoia Vista Circle
City Salt Lake City State UT Zip Code 84104
Purpose of Expenditure Direct mail Category/Type 004
Date of Public Distribution/Dissemination 10/21/2014
Amount 14789.00
Transaction ID : SB.145
Date of Disbursement or Obligation 10/14/2014
Name of Federal Candidate Julia Brownley Support Oppose
Office Sought: House District: 26 State: CA
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 29578.00
(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 Caleb Crosby [Electronically Filed] Date 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Arena Communications
Mailing Address 1780 Sequoia Vista Circle
City Salt Lake City State UT Zip Code 84104
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate Julia Brownley
Calendar Year-To-Date Per Election for Office Sought 373634.16

Date of Public Distribution/Dissemination 10/22/2014
Amount 14789.00
Transaction ID : SB.146
Date of Disbursement or Obligation 10/14/2014
Office Sought: House District: 26 State: CA
Disbursement For: General 2014

Full Name of Payee Arena Communications
Mailing Address 1780 Sequoia Vista Circle
City Salt Lake City State UT Zip Code 84104
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate Andrew Romanoff
Calendar Year-To-Date Per Election for Office Sought 23595.00

Date of Public Distribution/Dissemination 10/17/2014
Amount 23595.00
Transaction ID : SB.147
Date of Disbursement or Obligation 10/14/2014
Office Sought: House District: 06 State: CO
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 38384.00
(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.

Caleb Crosby [Electronically Filed] Date 12/04/2014
Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>		FEC IDENTIFICATION NUMBER <b>C C00504530</b>
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Check if  24-hour report  48-hour report  New report  Amends report filed on  /  /

Full Name of Payee <b>Arena Communications</b> Reported as operating expenditure in period of disbursement		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1780 Sequoia Vista Circle		Amount <input type="text"/>
City Salt Lake City	State UT	Zip Code 84104
Purpose of Expenditure Direct mail	Category/Type 004	Transaction ID : <b>SB.148</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Andrew Romanoff	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
		<input type="text"/> 47190.00

Full Name of Payee <b>IMGE LLC</b> Reported as operating expenditure in period of disbursement		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 603 King Street, 4th Floor		Amount <input type="text"/>
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Digital advertising	Category/Type 004	Transaction ID : <b>SB.149</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Gwen Graham	<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>FL</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
		<input type="text"/> 536969.52

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<input type="text"/>	75595.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<input type="text"/>	
(c) <b>TOTAL</b> 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.

Signature Caleb Crosby [Electronically Filed] Date  /  /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Push Digital
Mailing Address PO Box 7431
City Columbia State SC Zip Code 29202
Purpose of Expenditure Digital advertising Category/Type 004
Name of Federal Candidate Ron Barber Support Oppose
Calendar Year-To-Date Per Election for Office Sought 998831.60

Date of Public Distribution/Dissemination 10/21/2014
Amount 91000.00
Transaction ID : SB.150
Date of Disbursement or Obligation 10/14/2014
Office Sought: House District: 02 State: AZ
Disbursement For: General 2014

Full Name of Payee
Push Digital
Mailing Address PO Box 7431
City Columbia State SC Zip Code 29202
Purpose of Expenditure Digital advertising Category/Type 004
Name of Federal Candidate Martha McSally Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1160781.18

Date of Public Distribution/Dissemination 10/31/2014
Amount 19000.00
Transaction ID : SB.151
Date of Disbursement or Obligation 10/14/2014
Office Sought: House District: 02 State: AZ
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 110000.00
(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 Caleb Crosby [Electronically Filed] Date 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Push Digital
Mailing Address: PO Box 7431
City: Columbia, State: SC, Zip Code: 29202
Purpose of Expenditure: Digital advertising
Category/Type: 004
Name of Federal Candidate: Carol Shea-Porter
Office Sought: House, District: 01, State: NH
Amount: 10000.00
Transaction ID: SB.152
Date of Disbursement or Obligation: 10/14/2014
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 1440547.75

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: TV/Media placement
Category/Type: 004
Name of Federal Candidate: Ron Barber
Office Sought: House, District: 02, State: AZ
Amount: 103938.20
Transaction ID: SB.153
Date of Disbursement or Obligation: 10/15/2014
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 998831.60

(a) SUBTOTAL of Itemized Independent Expenditures: 203938.20
(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.

Caleb Crosby
[Electronically Filed]
Date: 12/04/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
American Media & Advocacy Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
TV/Media placement Category/Type
004
Date of Public Distribution/Dissemination
10 / 28 / 2014
Amount
74002.28
Transaction ID : SB.154
Date of Disbursement or Obligation
10 / 15 / 2014
Name of Federal Candidate
Ron Barber Support Oppose
Office Sought: House District: 02
President Senate State: AZ
Calendar Year-To-Date
Per Election for Office Sought
1142322.98
Disbursement For: Primary General
2014 Other (specify)

Full Name of Payee
Arena Communications
Mailing Address
1780 Sequoia Vista Circle
City
Salt Lake City State
UT Zip Code
84104
Purpose of Expenditure
Direct mail Category/Type
004
Date of Public Distribution/Dissemination
10 / 16 / 2014
Amount
21105.00
Transaction ID : SB.155
Date of Disbursement or Obligation
10 / 15 / 2014
Name of Federal Candidate
Ron Barber Support Oppose
Office Sought: House District: 02
President Senate State: AZ
Calendar Year-To-Date
Per Election for Office Sought
21105.00
Disbursement For: Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 95107.28
(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.
Caleb Crosby [Electronically Filed] Date 12 / 04 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>		FEC IDENTIFICATION NUMBER <b>C C00504530</b>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>		

Full Name of Payee <b>Arena Communications</b> Reported as operating expenditure in period of disbursement	Mailing Address 1780 Sequoia Vista Circle	City Salt Lake City	State UT	Zip Code 84104
Purpose of Expenditure Direct mail	Category/Type 004	Name of Federal Candidate Ron Barber		
Calendar Year-To-Date Per Election for Office Sought 998831.60		Office Sought: <input checked="" type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		

Date of Public Distribution/Dissemination 10 / 21 / 2014	Amount 21105.00
Date of Disbursement or Obligation 10 / 15 / 2014	Transaction ID : <b>SB.156</b>
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>American Media &amp; Advocacy Group</b> Reported as operating expenditure in period of disbursement	Mailing Address 815 Slaters Lane	City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure TV/Media placement	Category/Type 004	Name of Federal Candidate Ron Barber		
Calendar Year-To-Date Per Election for Office Sought 998831.60		Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		

Date of Public Distribution/Dissemination 10 / 21 / 2014	Amount 572925.20
Date of Disbursement or Obligation 09 / 24 / 2014	Transaction ID : <b>SB.157</b>
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	594030.20
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	6683693.73

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.

*Caleb Crosby*  
Signature

[Electronically Filed]      Date  /  /