

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

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 FlexPoint Media
Mailing Address P.O. Box 1051
City New Albany State OH Zip Code 43054
Purpose of Expenditure Media Placement Category/Type 004
Name of Federal Candidate Rose, Max, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1397027.83

Date of Public Distribution/Dissemination 10 / 07 / 2020
Amount 68043.40
Transaction ID : SE.001
Date of Disbursement or Obligation 10 / 02 / 2020
Office Sought: House District: 11 State: NY
Disbursement For: General 2020

Full Name of Payee FlexPoint Media
Mailing Address P.O. Box 1051
City New Albany State OH Zip Code 43054
Purpose of Expenditure Media Placement Category/Type 004
Name of Federal Candidate Rose, Max, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1558902.83

Date of Public Distribution/Dissemination 10 / 07 / 2020
Amount 161875.00
Transaction ID : SE.002
Date of Disbursement or Obligation 10 / 02 / 2020
Office Sought: House District: 11 State: NY
Disbursement For: General 2020

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 229918.40

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Crosby, Caleb, , , [Electronically Filed] Date 10 / 09 / 2020
Signature

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

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 Big Dog Strategies
Mailing Address P.O. Box 217
City Clarence Center State NY Zip Code 14032
Purpose of Expenditure Direct Mail Category/Type 004

Date of Public Distribution/Dissemination 10 / 07 / 2020
Amount 25472.96
Transaction ID : SE.003
Date of Disbursement or Obligation 10 / 06 / 2020

Name of Federal Candidate Malliotakis, Nicole, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1584375.79

Office Sought: House District: 11 State: NY
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate
Support Oppose
Calendar Year-To-Date Per Election for Office Sought

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

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 25472.96, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 255391.36

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Crosby, Caleb, , Signature [Electronically Filed] Date 10 / 09 / 2020