## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Congressional Leadership Fund			
9. 000.0	C C00504530		
Check if 24-hour report 48-hour report New report Amends report filed on			
Full Name of Payee	Date of Public Distribution/Dissemination		
ADVANTAGE INC	M M / D D / Y Y Y Y		
Mailing Address 9420 BONITA BEACH ROAD	02 28 2024		
SUITE 200	Amount		
City State 2	Zip Code 16600.00		
	Transaction ID : SE24.182 Date of Disbursement or Obligation		
Purpose of Expenditure	Category/ 004 02 28 2024		
PHONE CALLS	Type 02 28 2024		
Name of Federal Candidate	Support Office Sought:   House District: 22		
VALADAO, DAVID, , ,	Oppose President Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2024		
Tot Elocated for Chinese Cought	Under (specify) ▶		
Full Name of Payee  ADVANTAGE INC	Date of Public Distribution/Dissemination		
ADVANTAGE INC	02 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 9420 BONITA BEACH ROAD			
SUITE 200	Amount		
City State 2	Zip Code 21000.00		
BONITA SPRINGS FL	34135 Transaction ID : SE24.183		
Purpose of Expenditure	Category/ 204		
PHONE CALLS	Type 004 02 28 2024		
Name of Federal Candidate	Support Office Sought: House District: 01		
BUCKHOUT, LAURIE, , ,	Oppose President Senate State: NC		
Calendar Year-To-Date	Disbursement For: X Primary General		
Per Election for Office Sought	386469.85		
(a) SUBTOTAL of Itemized Independent Expenditures	37600.00		
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>&gt;</b>		
(c) TOTAL Independent Expenditures	<b>&gt;</b>		
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, , ,	Date 02 29 2024		
Signature			

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

ooneddie L)		FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
Congressional Leadership Fund		C C00504530		
Check if 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee		Date of Public Distribution/Dissemination		
FLEXPOINT MEDIA INC		02 / 28 / 2024		
Mailing Address PO BOX 1051		Amount		
City State	Zip Code	48000.00		
NEW ALBANY OH	43054	Transaction ID : SE24.185  Date of Disbursement or Obligation		
Purpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	02 / 28 / 2024		
Name of Federal Candidate	Support Office	ce Sought: X House District: 22		
MATHYS, CHRIS, , ,	X Oppose	President Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought	1077927.94 Dist	oursement For: X Primary General  Other (specify) ▶		
Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination		
Mailing Address PO BOX 1051		Amount 28 2024		
City State	Zip Code	102397.50		
NEW ALBANY OH	43054	Transaction ID : SE24.189  Date of Disbursement or Obligation		
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	02 / 26 / Y 2024		
Name of Federal Candidate	Support Office	ce Sought:     House District: 22		
MATHYS, CHRIS, , ,		President Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought		oursement For: Primary General  Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures		150397.50		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Crosby, Caleb, , ,	Date	02 29 / 2024		
Signature				

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

··· ,		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report 48-hour report New rep	port Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
RUMBLEUP, LLC		02 28 7 2024
Mailing Address 2001 K ST NW		Amount
City State	Zip Code	10000.00
WASHINGTON DC	20006	Transaction ID : SE24.180 Date of Disbursement or Obligation
Purpose of Expenditure TEXT MESSAGES	Category/ Type 004	02 / 28 / 2024
Name of Federal Candidate	Support Office	Sought: X House District: 01
BUCKHOUT, LAURIE, , ,	Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	386469.85 Disbu 2024	rsement For:
Full Name of Payee RUMBLEUP, LLC		Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2001 K ST NW		Amount
City State	Zip Code	5000.00
WASHINGTON DC	20006	Transaction ID : SE24.181 Date of Disbursement or Obligation
Purpose of Expenditure TEXT MESSAGES	Category/ Type 004	02 / 28 / 2024
Name of Federal Candidate	Support Office	e Sought: X House District: 22
VALADAO, DAVID, , ,	Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	1077927.94 Disbu 2024	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	······	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	202997.50
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date 0	29 2024
Signature		

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