10/16/2020 19 : 14

Image# 202010169297001657 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)		TURES		PAGE 1 OF 2 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	ENTIFICATION NUMBER V						
Congressional Leadership Fu	nd		C	C00504530			
Check if 24-hour report X 48-hour	report X New repo	ort Amends repo	ort filed on	/ D = D / Y = Y = Y = Y			
Full Name of Payee			Date of Publi	ic Distribution/Dissemination			
Arena			^M 10	/ D D / Y Y Y Y 14 2020			
Mailing Address 1260 Stringham Ave				14 2020			
#350			Amount				
City	State	Zip Code		28210.32			
Salt Lake City	UT	84106	Transaction	Transaction ID : SE.001 Date of Disbursement or Obligation			
Purpose of Expenditure Media Placement		Category/ Type 004					
Name of Federal Candidate		Support	Office Sought:	¥ House District: 01			
Galvin, Alyse, , ,		× Oppose	President	Senate State: AK			
Calendar Year-To-Date			Disbursement For:	Primary X General			
Per Election for Office Sought		608201.39	2020 Other (s				
Full Name of Payee				ic Distribution/Dissemination			
FlexPoint Media			M	/ D D / Y Y Y Y			
Mailing Address P.O. Box 1051			10	14 2020			
			Amount				
City	State	Zip Code		175538.18			
New Albany	ОН	43054	Transaction ID : SE.002 Date of Disbursement or Obligation				
Purpose of Expenditure Media Placement		Category/ Type 004	^M 10	/ D D / Y Y Y Y 09 / 2020			
Name of Federal Candidate		Support	Office Sought:	K House District: 01			
Galvin, Alyse, , ,		X Oppose	President	Senate State: AK			
Calendar Year-To-Date			Disbursement For:	Primary X General			
Per Election for Office Sought		783739.57	2020 Other (s	pecify) ▶			
(a) SUBTOTAL of Itemized Independent	Expenditures		• •	203748.50			
(b) SUBTOTAL of Unitemized Independe	ent Expenditures		•• ▶				
(c) TOTAL Independent Expenditures			·· •				
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized						
Crosby, Caleb, , ,			M M / D D				
Signature	[Electron	<i>ically Filed]</i> Date		2020			

Image# 202010169297001658 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Sched	ule E)					PAGE 2 FOR SE OF F	OF 2	
NAME C	F COMMITTEE (In Full)							
Cong	ressional Leadership Fund				_			
					C c	00504530		
Check if	24-hour report X 48-hour report	X New rep	ort Amends repo		M /	D D /	Y = Y = Y = Y	
	Name of Payee edPrint Strategy				of Public	Distribution/D	issemination	
Maili	ng Address 1050 Johnnie Dodds Blvd			Amour	10 nt	14	2020	
	Unit 2414							
City		State	Zip Code				13000.00	
Μοι	int Pleasant	SC	29465		Transaction ID : SE.003 Date of Disbursement or Obligation			
	ose of Expenditure lia Production		Category/ Type 004	M	10 ^{//}	^D 14 /	2020	
Nam	e of Federal Candidate		Support	Office Sought	t: 🗡	House D	istrict: 01	
Gal	<i>v</i> in, Alyse, , ,		× Oppose	Preside		Senate	State: AK	
	Calendar Year-To-Date Per Election for Office Sought	7 7	796739.57	Disbursement 2020 Ot	t For:	Primary	X General	
Full	Name of Payee			Date of	of Public	Distribution/D	Dissemination	
				M	- M /	D D /	YYYYY	
Mail	ng Address							
				Amou	nt			
City		State	Zip Code					
				Date	of Disburg	sement or Ot	aligation	
Purp	ose of Expenditure		Category/ Type		/		Y Y Y Y Y	
Nam	e of Federal Candidate		Support	Office Sough	t:	House D	District:	
			Oppose	Preside	ent	Senate	State:	
	Calendar Year-To-Date			Disbursemen	t For:	Primary	General	
	Per Election for Office Sought			o	ther (spe	cify) ►		
(a) S	UBTOTAL of Itemized Independent Expenditu	ures		•••	-7-	-7-	13000.00	
(b) S	UBTOTAL of Unitemized Independent Expendent	ditures		• •				
(c) T	OTAL Independent Expenditures						216748.50	
						7=		
with,	penalty of perjury I certify that the indepen or at the request or suggestion of, any candi- committee) any political party committee or it	date or authorized						
	Crosby, Caleb, , ,			M M /	DD	/ Y Y	Y Y	
Qir	gnature	[Electron	<i>ically Filed]</i> Date	e 10	16	2020		
ଧା	Jiiatai 6							