24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if 24-hour report	on M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Meridian Pacific	10 14 2020
Mailing Address 925 University Ave	Amount
City State Zip Code	14334.42
Sacramento CA 95825	Transaction ID : SE.001 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Category/ Type 004	10 09 / 2020
Name of Federal Candidate Support Offic	e Sought: X House District: 48
Rouda, Harley, , ,	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disb 2009410.84	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	pursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	44004.40
(a) SOBIOTAL OF REMIZED MUSE Experiorities	14334.42
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	14334.42
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.	
	10 16 2020
Signature	