

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input checked="" type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on **03 / 03 / 2020** in the State of **TX**

- (d) 30-Day **POST-Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period **01 / 01 / 2020** through **02 / 12 / 2020**

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

Crosby, Caleb, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Crosby, Caleb, , ,* [Electronically Filed] Date **02 / 20 / 2020**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2020"/>		28023865.12
(b) Cash on Hand at Beginning of Reporting Period.....	28023865.12	
(c) Total Receipts (from Line 19)	3675534.00	3675534.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	31699399.12	31699399.12
7. Total Disbursements (from Line 31).....	561335.78	561335.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	31138063.34	31138063.34
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	688998.70	

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

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).....	3655486.00	3655486.00
(ii) Unitemized	5048.00	5048.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3660534.00	3660534.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	15000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3675534.00	3675534.00
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)).....▶	3675534.00	3675534.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3675534.00	3675534.00

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	170460.78	170460.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	170460.78	170460.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	390875.00	390875.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	561335.78	561335.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	561335.78	561335.78

DETAILED SUMMARY PAGE
of Disbursements

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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)	3675534.00	3675534.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3675534.00	3675534.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	170460.78	170460.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	170460.78	170460.78

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 36
(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

A. MURRAY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 CAMBRIDGE BOULEVARD SOUTHEAST
 City GRAND RAPIDS State MI Zip Code 49506-2810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEIJER Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 01 / 2020
Transaction ID : SA11A.7298
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. SCHIERBEEK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2120 ONEKAMA DRIVE SE
 City GRAND RAPIDS State MI Zip Code 49506-5325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RDV CORPORATION Occupation (for Individual) CEO/PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 01 / 07 / 2020
Transaction ID : SA11A.7302
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. SCHWARZMAN, STEPHEN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 345 PARK AVE. FLOOR 31
 City NEW YORK State NY Zip Code 10154-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BLACKSTONE GROUP Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500000.00

Date of Receipt 01 / 15 / 2020
Transaction ID : SA11A.7307
 Amount of Each Receipt this Period 2500000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2515000.00
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 7 OF 36
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7117.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	17	/	2020

Transaction ID : SA11C.738835

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. BURTON, RICHARD, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6722 BIANCA AVENUE

City VAN NUYS	State CA	Zip Code 91406-5342
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	17	/	2020

Transaction ID : SA11A.7390

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. HILLWOOD DEVELOPMENT COMPANY LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3000 TURTLE CREEK BLVD.

City DALLAS	State TX	Zip Code 75219-6268
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	21	/	2020

Transaction ID : SA11A.7396

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50250.00
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 36
	<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

A. WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7117.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2020

Transaction ID : SA11C.743272

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. STEINER, STEVE, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 544 SHORE DR.

City LARGO	State FL	Zip Code 33771-1533
---------------	-------------	------------------------

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

Name of Employer (for Individual) CONTRACTORS REGISTER	Occupation (for Individual) COMPUTER PROGRAMMER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2020

Transaction ID : SA11A.7433

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. BLUE, J., NEAL, ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9756 LA JOLLA FARMS ROAD

City LA JOLLA	State CA	Zip Code 92037-1133
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GENERAL ATOMICS	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2020

Transaction ID : SA11A.7437

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100500.00
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 9 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7117.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2020

Transaction ID : SA11C.743881

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. HASSELBRING, CARYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 CHEROKEE DRIVE

City ORLANDO	State FL	Zip Code 32801-3811
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RHEUMATOLOGY ASSOCIATES	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2020

Transaction ID : SA11A.7442

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. STEPHENS, WARREN, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 CENTER STREET

City LITTLE ROCK	State AR	Zip Code 72201-4402
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEPHENS INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		30		2020

Transaction ID : SA11A.7443

Amount of Each Receipt this Period
250000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250250.00
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: PAGE 10 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8700 W BRYN MAWR AVE
 SUITE 1200S
 City CHICAGO State IL Zip Code 60631-3512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 01 / 30 / 2020
Transaction ID : SA11A.7444
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

B. JOHNSON, CHARLES, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 S. OCEAN BLVD
 City PALM BEACH State FL Zip Code 33480-5016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt 01 / 31 / 2020
Transaction ID : SA11A.7471
 Amount of Each Receipt this Period 500000.00
 Memo Item
CONTRIBUTION

C. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7117.00

Date of Receipt 02 / 04 / 2020
Transaction ID : SA11C.7473119
 Amount of Each Receipt this Period 1500.00
 Memo Item
CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional)..... ▶ 525000.00
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 11 OF 36
	<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

A. FINLEY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 27535
 City HOUSTON State TX Zip Code 77227-7535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 04 / 2020
Transaction ID : SA11A.7482
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7117.00

Date of Receipt 02 / 06 / 2020
Transaction ID : SA11C.7509149
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. DIMAS, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 41534
 City LONG BEACH State CA Zip Code 90853-1534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IMPERIAL BAG & PAPER Occupation (for Individual) IMPORT ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 06 / 2020
Transaction ID : SA11A.7512
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	1750.00
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: PAGE 12 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. AMERICAN FUEL AND PETROCHEMICAL MANUFACTURERS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1667 K STREET, NW
 SUITE 700
 City WASHINGTON State DC Zip Code 20006-1654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 02 / 10 / 2020
Transaction ID : SA11A.7515
 Amount of Each Receipt this Period 100000.00
 Memo Item
CONTRIBUTION

B. CROW HOLDINGS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 MAPLE AVE
 City DALLAS State TX Zip Code 75219-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 02 / 10 / 2020
Transaction ID : SA11A.7517
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

C. VAN ANDEL, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 74
 City ADA State MI Zip Code 49301-0074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AMWAY CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 02 / 12 / 2020
Transaction ID : SA11A.7557
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175000.00
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 13 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. AMERICAN ACTION NETWORK
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1747 PENNSYLVANIA AVENUE, NW
 5TH FLOOR
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 37736.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2020
Transaction ID : SA11A.001
 Amount of Each Receipt this Period
 37736.00
 Memo Item
 IN-KIND: RESEARCH SERVICES

B.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 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
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 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
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	37736.00
TOTAL This Period (last page this line number only).....	3655486.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 14 OF 36	
(check only one)			
<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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THORNBERRY FOR CONGRESS COMMITTEE

Mailing Address **PO BOX 9392**

City AMARILLO	State TX	Zip Code 79105-9392
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00286187**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2020

Transaction ID : SA11C.7516

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	15000.00

**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"/> 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 - see memo entries

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.77
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mailchimp

Mailing Address 675 Ponce De Leon Ave NE #5000

City Atlanta State GA Zip Code 30308

Purpose of Disbursement
Advertising

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.78
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Microsoft

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement
Computer services

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.80
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"/> 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. Pantheon Systems

Mailing Address 717 California Street

City
San Francisco

State
CA

Zip Code
94108

Purpose of Disbursement
Computer services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	0

FEC Identification Number

C [REDACTED]

Transaction ID : SB.82

Amount of Each Disbursement this Period

[REDACTED] 132.50

Memo Item

Full Name (Last, First, Middle Initial)

B. Sfoglina

Mailing Address 1099 New York Ave.

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Event venue and catering

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	0

FEC Identification Number

C [REDACTED]

Transaction ID : SB.79

Amount of Each Disbursement this Period

[REDACTED] 2907.70

Memo Item

Full Name (Last, First, Middle Initial)

C. WP Engine

Mailing Address 504 Lavaca Street
Suite 1000

City
Austin

State
TX

Zip Code
78701

Purpose of Disbursement
Computer services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	2	0

FEC Identification Number

C [REDACTED]

Transaction ID : SB.81

Amount of Each Disbursement this Period

[REDACTED] 115.00

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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"/> 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
Merchant fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
01 / 07 / 2020

FEC Identification Number

Transaction ID : SB.6
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical Services

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Merchant fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
01 / 10 / 2020

FEC Identification Number

Transaction ID : SB.10
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical Services

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Merchant fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
01 / 13 / 2020

FEC Identification Number

Transaction ID : SB.11
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"/> 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. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 01 / 14 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [] Transaction ID : SB.14 Amount of Each Disbursement this Period [] 0.87
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee		<input type="checkbox"/> 003 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 01 / 15 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [] Transaction ID : SB.17 Amount of Each Disbursement this Period [] 13.56
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee		<input type="checkbox"/> 003 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 01 / 16 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [] Transaction ID : SB.18 Amount of Each Disbursement this Period [] 1.93
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee		<input type="checkbox"/> 003 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 16.36
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"/> 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

A. WinRed Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 17 / 2020

FEC Identification Number: C

Transaction ID : SB.21

Amount of Each Disbursement this Period: 11.92

Memo Item

B. American Action Network

Full Name (Last, First, Middle Initial)

Mailing Address 1747 Pennsylvania Ave. NW
5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement Cost share payment - rent, overhead

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 21 / 2020

FEC Identification Number: C

Transaction ID : SB.83

Amount of Each Disbursement this Period: 50826.03

Memo Item

C. WinRed Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 21 / 2020

FEC Identification Number: C

Transaction ID : SB.30

Amount of Each Disbursement this Period: 12.28

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 50850.23

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"/> 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
Merchant fee

001
 002
 003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 22 / 2020

FEC Identification Number

C

Transaction ID : SB.32

Amount of Each Disbursement this Period

0.88

Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical Services

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Merchant fee

001
 002
 003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 25 / 2020

FEC Identification Number

C

Transaction ID : SB.36

Amount of Each Disbursement this Period

19.73

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 Spring Hill Road
Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
Donor database subscription

001
 002
 003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2020

FEC Identification Number

C

Transaction ID : SB.70

Amount of Each Disbursement this Period

500.00

Memo Item

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

520.61

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"/> 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. E.C. Maruggi Incorporated		Date of Disbursement MM / DD / YYYY 01 / 28 / 2020	
Mailing Address 660 South Howell St.		FEC Identification Number C [REDACTED] Transaction ID : SB.66 Amount of Each Disbursement this Period [REDACTED] 1000.00	
City St. Paul	State MN	Zip Code 55116	Category/ Type 001
Purpose of Disbursement Administrative consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Jones Day		Date of Disbursement MM / DD / YYYY 01 / 28 / 2020	
Mailing Address 51 Louisiana Ave. NW		FEC Identification Number C [REDACTED] Transaction ID : SB.73 Amount of Each Disbursement this Period [REDACTED] 3495.00	
City Washington	State DC	Zip Code 20001	Category/ Type 001
Purpose of Disbursement Legal services			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Trinity Financial Reporting & Compliance		Date of Disbursement MM / DD / YYYY 01 / 28 / 2020	
Mailing Address PO Box 710993		FEC Identification Number C [REDACTED] Transaction ID : SB.74 Amount of Each Disbursement this Period [REDACTED] 3104.50	
City Herndon	State VA	Zip Code 20171	Category/ Type 001
Purpose of Disbursement Accounting and compliance			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 7599.50
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 01 / 28 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.41
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	Category/ Type 003	Amount of Each Disbursement this Period [REDACTED] 30.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Brandywine Public Affairs, Inc.		Date of Disbursement MM / DD / YYYY 01 / 29 / 2020
Mailing Address 2201 Mill Road Apt. 214		FEC Identification Number C [REDACTED] Transaction ID : SB.67
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Strategy consulting	Category/ Type 001	Amount of Each Disbursement this Period [REDACTED] 13333.33
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 01 / 29 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.44
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	Category/ Type 003	Amount of Each Disbursement this Period [REDACTED] 11.05
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 13374.38
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 01 / 30 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.47
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	Candidate Name	Amount of Each Disbursement this Period [REDACTED] 2.61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) B. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.50
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	Candidate Name	Amount of Each Disbursement this Period [REDACTED] 1.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) C. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 02 / 01 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.53
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	Candidate Name	Amount of Each Disbursement this Period [REDACTED] 17.48
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 003	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 21.34
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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		Date of Disbursement MM / DD / YYYY 02 / 04 / 2020	
Mailing Address P.O. Box 2557		FEC Identification Number C [] Transaction ID : SB.84 Amount of Each Disbursement this Period [] 1846.86	
City Omaha	State NE	Zip Code 68103	Category/ Type 001
Purpose of Disbursement Credit card payment - see memo entries			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Cosi		Date of Disbursement MM / DD / YYYY 02 / 04 / 2020	
Mailing Address 1501 K St NW		FEC Identification Number C [] Transaction ID : SB.85 Amount of Each Disbursement this Period [] 481.60	
City Washington	State DC	Zip Code 20005	Category/ Type 001
Purpose of Disbursement Event catering			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement MM / DD / YYYY 02 / 04 / 2020	
Mailing Address 3875 Airways		FEC Identification Number C [] Transaction ID : SB.87 Amount of Each Disbursement this Period [] 396.27	
City Memphis	State TN	Zip Code 38116	Category/ Type 001
Purpose of Disbursement Printing and shipping			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1846.86
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"/> 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. Mailchimp

Mailing Address 675 Ponce De Leon Ave NE
#5000

City Atlanta State GA Zip Code 30308

Purpose of Disbursement Advertising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 04 / 2020

FEC Identification Number

Transaction ID : SB.86
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Computer services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 04 / 2020

FEC Identification Number

Transaction ID : SB.88
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Pantheon Systems

Mailing Address 717 California Street

City San Francisco State CA Zip Code 94108

Purpose of Disbursement Computer services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 04 / 2020

FEC Identification Number

Transaction ID : SB.90
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"/> 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. WP Engine

Mailing Address 504 Lavaca Street
Suite 1000

City Austin State TX Zip Code 78701

Purpose of Disbursement
Computer services

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
02 / 04 / 2020

FEC Identification Number
C
Transaction ID : SB.89
Amount of Each Disbursement this Period
115.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical Services

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

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
MM / DD / YYYY
02 / 04 / 2020

FEC Identification Number
C
Transaction ID : SB.55
Amount of Each Disbursement this Period
59.91

Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical Services

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

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
MM / DD / YYYY
02 / 05 / 2020

FEC Identification Number
C
Transaction ID : SB.56
Amount of Each Disbursement this Period
1.74

Memo Item

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

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

61.65

**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"/> 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. WinRed Technical Services

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Merchant fee

001
 002
 003
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 05 / 2020

FEC Identification Number

C
Transaction ID : SB.57
Amount of Each Disbursement this Period
 25.31

Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical Services

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Merchant fee

001
 002
 003
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2020

FEC Identification Number

C
Transaction ID : SB.59
Amount of Each Disbursement this Period
 74.10

Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical Services

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Merchant fee

001
 002
 003
Category/
Type

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2020

FEC Identification Number

C
Transaction ID : SB.60
Amount of Each Disbursement this Period
 28.55

Memo Item

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

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

127.96

**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"/> 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. Brandywine Public Affairs, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2020

Mailing Address 2201 Mill Road
Apt. 214

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Strategy consulting

001
Category/ Type

FEC Identification Number

C

Transaction ID : SB.68

Amount of Each Disbursement this Period

13333.33

Memo Item

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. CMDI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2020

Mailing Address 1593 Spring Hill Road
Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
Donor database subscription

001
Category/ Type

FEC Identification Number

C

Transaction ID : SB.71

Amount of Each Disbursement this Period

500.00

Memo Item

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. CNA Insurance

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2020

Mailing Address P.O. Box 790094

City St. Louis State MO Zip Code 63179

Purpose of Disbursement
Insurance premium

001
Category/ Type

FEC Identification Number

C

Transaction ID : SB.72

Amount of Each Disbursement this Period

1195.00

Memo Item

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

15028.33

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

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**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"/> 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. E.C. Maruggi Incorporated

Mailing Address 660 South Howell St.

City
St. Paul

State
MN

Zip Code
55116

Purpose of Disbursement
Administrative consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2020

FEC Identification Number

C

Transaction ID : SB.69

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jones Day

Mailing Address 51 Louisiana Ave. NW

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Legal services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2020

FEC Identification Number

C

Transaction ID : SB.75

Amount of Each Disbursement this Period

8251.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Strategic Advance Services, LLC

Mailing Address 611 Pennsylvania Ave. SE
Suite 267

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Travel and event planning services

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2020

FEC Identification Number

C

Transaction ID : SB.93

Amount of Each Disbursement this Period

4844.49

Memo Item

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

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

14095.64

**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"/> 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. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 02 / 09 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.61
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	Category/ Type 003	Amount of Each Disbursement this Period [REDACTED] 1.25
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 02 / 10 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.62
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	Category/ Type 003	Amount of Each Disbursement this Period [REDACTED] 2.50
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Convergence Media LLC		Date of Disbursement MM / DD / YYYY 02 / 11 / 2020
Mailing Address 1010 N. Fairfax St. Suite 250		FEC Identification Number C [REDACTED] Transaction ID : SB.76
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media placement and production - Non IE	Category/ Type 004	Amount of Each Disbursement this Period [REDACTED] 25000.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 25003.75
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 02 / 11 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.63
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	<input type="checkbox"/> 003	Amount of Each Disbursement this Period [REDACTED] 72.52
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. American Action Network		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB.94
City Washington	State DC	Zip Code 20006
Purpose of Disbursement In-kind: Research services	<input type="checkbox"/> 001	Amount of Each Disbursement this Period [REDACTED] 37736.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WinRed Technical Services		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020
Mailing Address 1776 Wilson Blvd. Suite 530		FEC Identification Number C [REDACTED] Transaction ID : SB.64
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement Merchant fee	<input type="checkbox"/> 003	Amount of Each Disbursement this Period [REDACTED] 11.22
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 37819.74
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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

A. WinRed Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 1776 Wilson Blvd.
Suite 530

City Arlington State VA Zip Code 22209

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY
02 / 12 / 2020

FEC Identification Number C

Transaction ID : SB.65

Amount of Each Disbursement this Period 37.20

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	37.20
TOTAL This Period (last page this line number only).....▶	169884.08

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 36
	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 American Action Network			Nature of Debt (Purpose): Amounts owed for services provided
Mailing Address 1747 Pennsylvania Avenue, NW 5th Floor			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period <input type="text" value="688998.70"/>		Transaction ID : SD.001	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="688998.70"/>	

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) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="688998.70"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="688998.70"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="688998.70"/>

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

Form/Schedule: SD10
Transaction ID : SD.001

Amounts owed under cost-sharing agreement for services provided

Form/Schedule:
Transaction ID:

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 FlexPoint Media
Mailing Address PO Box 1051
City New Albany State OH Zip Code 43054
Purpose of Expenditure Media placement Category/Type 004
Name of Federal Candidate: Granger, Kay, , , Support
Office Sought: House District: 12 State: TX
Calendar Year-To-Date Per Election for Office Sought 95800.00
Disbursement For: Primary

Full Name of Payee RedPrint Strategy
Mailing Address 1050 Johnnie Dodds Blvd. Unit 2414
City Mount Pleasant State SC Zip Code 29465
Purpose of Expenditure Media production Category/Type 004
Name of Federal Candidate: Granger, Kay, , , Support
Office Sought: House District: 12 State: TX
Calendar Year-To-Date Per Election for Office Sought 97800.00
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 97800.00
(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.

Crosby, Caleb, , ,
Signature

[Electronically Filed]

Date 02 / 20 / 2020

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 FlexPoint Media
Mailing Address PO Box 1051
City New Albany State OH Zip Code 43054
Purpose of Expenditure Media placement Category/Type 004
Name of Federal Candidate: Granger, Kay, , , Support
Office Sought: House District: 12 State: TX
Calendar Year-To-Date Per Election for Office Sought 382875.00
Disbursement For: Primary General 2020

Full Name of Payee RedPrint Strategy
Mailing Address 1050 Johnnie Dodds Blvd. Unit 2414
City Mount Pleasant State SC Zip Code 29465
Purpose of Expenditure Media production Category/Type 004
Name of Federal Candidate: Granger, Kay, , , Support
Office Sought: House District: 12 State: TX
Calendar Year-To-Date Per Election for Office Sought 390875.00
Disbursement For: Primary General 2020

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 293075.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 390875.00

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 02 / 20 / 2020

Signature