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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if X 24-hour report 48-hour report New report Amends report filed	I on Man / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Nebo Media	M M / D D / Y Y Y Y
Mailing Address PO Box 9825	10 31 2018 Amount
	Amount
City State Zip Code	199290.00
Arlington VA 22219	Transaction ID: 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement  Category/ Type  004	10 29 2018
Name of Federal Candidate Support Office	e Sought: X House District: 06
Casten, Sean, , ,	President Senate State: IL
Calendar Year-To-Date Per Election for Office Sought  Disbt 2946943.43  Disbt 2018	ursement For: Primary   General  Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M - M / D - D / T - T - T - T
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	199290.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expanditures	
(c) TOTAL Independent Expenditures	199290.00
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Courts Cold	
Buto	11 01 2018
Signature	