

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

Check if different than previously reported. (ACC) Washington DC 20006

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:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on 11 / 08 / 2016 in the State of DC

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

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 11 / 07 / 2016

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

**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="2016"/>	<input type="text"/>	<input type="text" value="865793.42"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33338823.83"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5422461.00"/>	<input type="text" value="42768666.52"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="38761284.83"/>	<input type="text" value="43634459.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="23496029.38"/>	<input type="text" value="28369204.49"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="15265255.45"/>	<input type="text" value="15265255.45"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="60697.48"/>	

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).....	5422311.00	42672220.15
(ii) Unitemized.....	150.00	510.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5422461.00	42672730.15
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	95000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	5422461.00	42767730.15
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	936.37
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)).....▶	5422461.00	42768666.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5422461.00	42768666.52

DETAILED SUMMARY PAGE

of Disbursements

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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	2885550.41	6036840.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2885550.41	6036840.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1600000.00	1995000.00
24. Independent Expenditures (use Schedule E)	19010478.97	20337363.62
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)) ..	23496029.38	28369204.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23496029.38	28369204.49

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)	5422461.00	42767730.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5422461.00	42767730.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2885550.41	6036840.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	936.37
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2885550.41	6035904.50

**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 73
(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. BUSCH, AUGUST, A., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MID RIVERS MALL DR.
 City ST. PETERS State MO Zip Code 63376-4320
 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 ▼ 290000.00

Date of Receipt 10 / 03 / 2016
Transaction ID : SA11A.1294
 Amount of Each Receipt this Period 40000.00
 Memo Item CONTRIBUTION

B. HILMAR CHEESE COMPANY
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8901 NORTH LANDER AVE.
 City HILMAR State CA Zip Code 95324-9327
 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 10 / 04 / 2016
Transaction ID : SA11A.1295
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. THE ANSCHUTZ CORPORATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 17TH ST. SUITE 2400
 City DENVER State CO Zip Code 80202-3941
 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 ▼ 250000.00

Date of Receipt 10 / 04 / 2016
Transaction ID : SA11A.1296
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 315000.00
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 73
	<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. GRANIERI, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 UNION SQUARE SOUTH
 City NEW YORK State NY Zip Code 10003-4183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JANE STREET Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 05 / 2016
Transaction ID : SA11A.1297
 Amount of Each Receipt this Period 50000.00
 Memo Item
 CONTRIBUTION

B. TULL, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10960 WILSHIRE BLVD. 5TH FLOOR
 City LOS ANGELES State CA Zip Code 90024-3708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEGENDARY PICTURES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 05 / 2016
Transaction ID : SA11A.1298
 Amount of Each Receipt this Period 100000.00
 Memo Item
 CONTRIBUTION

C. MCMAHON, LINDA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 HURLINGHAM DR.
 City GREENWICH State CT Zip Code 06831-2739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 10 / 06 / 2016
Transaction ID : SA11A.1299
 Amount of Each Receipt this Period 250000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400000.00
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 8 OF 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. CLEARPATH ACTION INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1355 GREENWOOD CLIFF
SUITE 301

City CHARLOTTE State NC Zip Code 28204-2981

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 ▼
75000.00

Date of Receipt
10 / 06 / 2016
Transaction ID : SA11A.1300

Amount of Each Receipt this Period
75000.00

Memo Item
CONTRIBUTION

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

Mailing Address N3569 VANDEN BOSCH RD

City KAUKAUNA State WI Zip Code 54130-7648

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 ▼
14000.00

Date of Receipt
10 / 07 / 2016
Transaction ID : SA11A.1301

Amount of Each Receipt this Period
14000.00

Memo Item
CONTRIBUTION

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

Mailing Address 536 WEST 43RD STREET APT 1F

City NEW YORK State NY Zip Code 10036-4341

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 ▼
250.00

Date of Receipt
10 / 10 / 2016
Transaction ID : SA11A.1274

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	89250.00
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 73
	<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. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACCOUNT

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

Mailing Address 8700 WEST 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 ▼
100000.00

Date of Receipt
10 / 11 / 2016

Transaction ID : SA11A.1302

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

B. NAU, JOHN, L., , III

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

Mailing Address P.O. BOX 130130

City HOUSTON State TX Zip Code 77219-0130

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

Name of Employer (for Individual) Occupation (for Individual)
SILVER EAGLE DISTRIBUTORS PRESIDENT AND CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75000.00

Date of Receipt
10 / 13 / 2016

Transaction ID : SA11A.1303

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. BLOOM, BRADLEY, M., ,

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

Mailing Address 11 ALBION RD.

City WELLESLEY State MA Zip Code 02481-1304

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

Name of Employer (for Individual) Occupation (for Individual)
BERKSHIRE PARTNERS LLC DIRECTOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300000.00

Date of Receipt
10 / 14 / 2016

Transaction ID : SA11A.1304

Amount of Each Receipt this Period
200000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325000.00
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 73
(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. MITCHELL, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10518 206TH AVE NE
 City REDMOND State WA Zip Code 98053-5113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RESEARCH SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11A.1280
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. OBERNDORF, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 WALNUT ST.
 City SAN FRANCISCO State CA Zip Code 94118-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBERNDORF ENTERPRISES LLC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750000.00

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11A.1305
 Amount of Each Receipt this Period 250000.00
 Memo Item
 CONTRIBUTION

C. YEARY, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 GRAND VIEW DRIVE
 City BERKELEY State CA Zip Code 94705-1639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMBERVIEW PARTNERS Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 16 / 2016
Transaction ID : SA11A.1281
 Amount of Each Receipt this Period 2700.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 252950.00
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 11 OF 73
(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. BANKE, BARBARA, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1045 ALEXANDER MOUNTAIN RD
 City GEYSERVILLE State CA Zip Code 95441-9315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JACKSON FAMILY WINES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400000.00

Date of Receipt 10 / 17 / 2016
Transaction ID : SA11A.1308
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

B. ISAAC, PAUL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 PROSPECT AVENUE
 City LARCHMONT State NY Zip Code 10538-3634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARBITER PARTNERS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 17 / 2016
Transaction ID : SA11A.1306
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. KLEIN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 MADISON AVENUE
 City NEW YORK State NY Zip Code 10022-4214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARK TOWER GROUP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 17 / 2016
Transaction ID : SA11A.1307
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250000.00
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 12 OF 73
	<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. POWERS, WILLIAM, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11766 WILSHIRE BLVD
 SUITE 1470
 City LOS ANGELES State CA Zip Code 90025-6579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE STRAND PARTNERS Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 17 / 2016
Transaction ID : SA11A.1310
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

B. ROSS, STEPHEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 COLUMBIA CIRCLE
 City NEW YORK State NY Zip Code 10002-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RELATED COMPANIES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200000.00

Date of Receipt 10 / 17 / 2016
Transaction ID : SA11A.1309
 Amount of Each Receipt this Period 200000.00
 Memo Item CONTRIBUTION

C. LOEB, DANIEL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 390 PARK AVENUE
 City NEW YORK State NY Zip Code 10022-4608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THIRD POINT LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700000.00

Date of Receipt 10 / 18 / 2016
Transaction ID : SA11A.1311
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400000.00
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 73
	<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. HILLWOOD DEVELOPMENT COMPANY LLC

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

Mailing Address 3090 OLIVE STREET
SUITE 200

City DALLAS State TX Zip Code 75219-7640

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 ▼
200000.00

Date of Receipt
10 / 18 / 2016

Transaction ID : SA11A.1312

Amount of Each Receipt this Period
200000.00

Memo Item
CONTRIBUTION

B. IGT

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

Mailing Address P.O. BOX 10580

City RENO State NV Zip Code 89510-

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
10 / 18 / 2016

Transaction ID : SA11A.1324

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. DRUCKENMILLER, STANLEY, F., ,

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

Mailing Address 40 W 57TH ST

City NEW YORK State NY Zip Code 10019-4001

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

Name of Employer (for Individual) Occupation (for Individual)
DUQUESNE FAMILY OFFICE LLC FUND MANAGER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350000.00

Date of Receipt
10 / 19 / 2016

Transaction ID : SA11A.1313

Amount of Each Receipt this Period
150000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375000.00
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 14 OF 73
	<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. DUHAMEL, WILLIAM, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3881 CLAY ST.
 City SAN FRANCISCO State CA Zip Code 94118-1615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROUTE ONE INVESTMENT Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 19 / 2016
Transaction ID : SA11A.1319
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. FOSTER, PAUL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 W MILLS AVE SUITE 200
 City EL PASO State TX Zip Code 79901-1575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTERN REFINING COMPANY Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 10 / 19 / 2016
Transaction ID : SA11A.1314
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

C. HERTOGE, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1040 5TH AVENUE, APT. 13-A
 City NEW YORK State NY Zip Code 10028-0137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HERTOGE FOUNDATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 19 / 2016
Transaction ID : SA11A.1315
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100000.00
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 15 OF 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. MCCAFFERY, MICHAEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 POETT RD.
 City HILLSBOROUGH State CA Zip Code 94010-6833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAKENA CAPITAL MANAGEMENT Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 19 / 2016
Transaction ID : SA11A.1317
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

B. 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 ▼ 1700000.00

Date of Receipt 10 / 19 / 2016
Transaction ID : SA11A.1318
 Amount of Each Receipt this Period 1700000.00
 Memo Item
CONTRIBUTION

C. ALTRIA CLIENT SERVICES LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 85088
 City RICHMOND State VA Zip Code 23285-5088
 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 ▼ 175000.00

Date of Receipt 10 / 19 / 2016
Transaction ID : SA11A.1316
 Amount of Each Receipt this Period 100000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1850000.00
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 16 OF 73
(check only one)

<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AMERICAN ACTION NETWORK

Mailing Address 1747 PENNSYLVANIA AVE. NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20006-4604

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 ▼
195428.15

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : SA11A.1325

Amount of Each Receipt this Period
65111.00

Memo Item
IN-KIND: PAYROLL/OFFICE SPACE/RESEARCH

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

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

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

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).....▶	65111.00
TOTAL This Period (last page this line number only).....▶	5422311.00

**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. Whatman Associates, Inc.

Mailing Address 6650 Stoffer Rd.

City Bellville State OH Zip Code 44813

Purpose of Disbursement
Canvassing

004
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 Y Y
10 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB.54
Amount of Each Disbursement this Period
-298500.00

Memo Item Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

B. Whatman Associates, Inc.

Mailing Address 6650 Stoffer Rd.

City Bellville State OH Zip Code 44813

Purpose of Disbursement
Canvassing

004
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 Y Y
10 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB.55
Amount of Each Disbursement this Period
-301550.00

Memo Item Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

C. Whatman Associates, Inc.

Mailing Address 6650 Stoffer Rd.

City Bellville State OH Zip Code 44813

Purpose of Disbursement
Canvassing

004
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 Y Y
10 / 01 / 2016

FEC Identification Number

C
Transaction ID : SB.56
Amount of Each Disbursement this Period
-302600.00

Memo Item Independent expenditure previously reported as operating expenditure

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

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

-902650.00

**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. E.C. Maruggi Incorporated		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 660 South Howell St.			
City St. Paul	State MN	Zip Code 55116	
Purpose of Disbursement Business consulting		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		<input type="text" value="001"/> Category/ Type	Transaction ID : SB.6 Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
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:			

Full Name (Last, First, Middle Initial) B. PCI Payment Solutions		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 902 Chinquapin			
City McLean	State VA	Zip Code 22102	
Purpose of Disbursement Merchant fee		<input type="text" value="003"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		<input type="text" value="003"/> Category/ Type	Transaction ID : SB.1 Amount of Each Disbursement this Period <input type="text" value="592.22"/>
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:			

Full Name (Last, First, Middle Initial) C. Optimus Consulting LLC		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016	
Mailing Address 1100 H Street, NW Suite 1100			
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Media optimization		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		<input type="text" value="001"/> Category/ Type	Transaction ID : SB.12 Amount of Each Disbursement this Period <input type="text" value="50000.00"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="51592.22"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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. Cold Spark Media

Mailing Address 307 Fourth Ave.
Suite 920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement Direct mail

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2016

FEC Identification Number

C

Transaction ID : SB.53

Amount of Each Disbursement this Period

-17977.56

Memo Item Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

B. Newton Heath LLC

Mailing Address P.O. Box 581

City Alexandria State VA Zip Code 22313

Purpose of Disbursement Survey

005
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2016

FEC Identification Number

C

Transaction ID : SB.18

Amount of Each Disbursement this Period

22898.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NMB Research LLC

Mailing Address 206 N. Fayette St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Survey

005
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2016

FEC Identification Number

C

Transaction ID : SB.15

Amount of Each Disbursement this Period

15500.00

Memo Item

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

20420.44

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. NMB Research LLC		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016	
Mailing Address 206 N. Fayette St.		FEC Identification Number C [REDACTED] Transaction ID : SB.16 Amount of Each Disbursement this Period 17500.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type 005
Purpose of Disbursement Survey			
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. NMB Research LLC		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016	
Mailing Address 206 N. Fayette St.		FEC Identification Number C [REDACTED] Transaction ID : SB.17 Amount of Each Disbursement this Period 17500.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type 005
Purpose of Disbursement Survey			
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. Push Digital		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016	
Mailing Address PO Box 7431		FEC Identification Number C [REDACTED] Transaction ID : SB.57 Amount of Each Disbursement this Period -83563.00 Independent expenditure previously reported as operating expenditure	
City Columbia	State SC	Zip Code 29202	Category/ Type 004
Purpose of Disbursement Media placement			
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).....▶	-48563.00
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. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant fee

003

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2016

FEC Identification Number

C

Transaction ID : SB.2

Amount of Each Disbursement this Period

14531.52

Memo Item

Full Name (Last, First, Middle Initial)

B. Conston Communications

Mailing Address 1758 U St. NW, Unit 3

City Washington State DC Zip Code 20009

Purpose of Disbursement
Strategy consulting

001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2016

FEC Identification Number

C

Transaction ID : SB.7

Amount of Each Disbursement this Period

7500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Meeting Street Research, LLC

Mailing Address 413 Pitt Street

City Mount Pleasant State SC Zip Code 29464

Purpose of Disbursement
Survey

005

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2016

FEC Identification Number

C

Transaction ID : SB.19

Amount of Each Disbursement this Period

14500.00

Memo Item

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

36531.52

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. Optimus Consulting LLC			Date of Disbursement MM / DD / YYYY 10 / 06 / 2016	
Mailing Address 1100 H Street, NW Suite 1100			FEC Identification Number C [] Transaction ID : SB.21 Amount of Each Disbursement this Period [] 25000.00	
City Washington	State DC	Zip Code 20005	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Survey		Category/ Type 005		
Candidate Name				
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. Wilson Perkins Allen			Date of Disbursement MM / DD / YYYY 10 / 06 / 2016	
Mailing Address 1319 Classen Drive			FEC Identification Number C [] Transaction ID : SB.20 Amount of Each Disbursement this Period [] 15000.00	
City Oklahoma City	State OK	Zip Code 73103	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Survey		Category/ Type 005		
Candidate Name				
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. Wilson Perkins Allen			Date of Disbursement MM / DD / YYYY 10 / 06 / 2016	
Mailing Address 1319 Classen Drive			FEC Identification Number C [] Transaction ID : SB.22 Amount of Each Disbursement this Period [] 15000.00	
City Oklahoma City	State OK	Zip Code 73103	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Survey		Category/ Type 005		
Candidate Name				
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).....▶	[] 55000.00
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

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
10 / 07 / 2016

FEC Identification Number

Transaction ID : SB.3
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Newton Heath LLC

Mailing Address P.O. Box 581

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Survey

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
10 / 07 / 2016

FEC Identification Number

Transaction ID : SB.23
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

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
10 / 11 / 2016

FEC Identification Number

Transaction ID : SB.4
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

A. American Viewpoint, Inc,

Full Name (Last, First, Middle Initial)

Mailing Address 1199 North Lee Street
Suite 808

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Survey

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : SB.25

Amount of Each Disbursement this Period: 23300.00

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 Spring Hill Road
Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement Donor database subscription

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : SB.14

Amount of Each Disbursement this Period: 500.00

Memo Item

C. DT Client Services LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1101 14th Street NW
Suite 650

City Washington State DC Zip Code 20005

Purpose of Disbursement Media optimization

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 11 / 2016

FEC Identification Number: C

Transaction ID : SB.13

Amount of Each Disbursement this Period: 8779.71

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 32579.71

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. NMB Research LLC		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016	
Mailing Address 206 N. Fayette St.		FEC Identification Number C [REDACTED] Transaction ID : SB.24	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 24000.00
Purpose of Disbursement Survey		Category/ Type 005	<input type="checkbox"/> Memo Item
Candidate Name			
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. North Star Opinion Research, Inc.		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016	
Mailing Address 112 North Alfred Street		FEC Identification Number C [REDACTED] Transaction ID : SB.26	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 18000.00
Purpose of Disbursement Survey		Category/ Type 005	<input type="checkbox"/> Memo Item
Candidate Name			
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. Newton Heath LLC		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016	
Mailing Address P.O. Box 581		FEC Identification Number C [REDACTED] Transaction ID : SB.27	
City Alexandria	State VA	Zip Code 22313	Amount of Each Disbursement this Period 25964.00
Purpose of Disbursement Survey		Category/ Type 005	<input type="checkbox"/> Memo Item
Candidate Name			
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).....▶	67964.00
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. Newton Heath LLC

Mailing Address P.O. Box 581

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Survey

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 Y Y
10 / 12 / 2016

FEC Identification Number

Transaction ID : SB.28
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Meeting Street Research, LLC

Mailing Address 413 Pitt Street

City Mount Pleasant State SC Zip Code 29464

Purpose of Disbursement
Survey

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 Y Y
10 / 13 / 2016

FEC Identification Number

Transaction ID : SB.29
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Meeting Street Research, LLC

Mailing Address 413 Pitt Street

City Mount Pleasant State SC Zip Code 29464

Purpose of Disbursement
Survey

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 Y Y
10 / 13 / 2016

FEC Identification Number

Transaction ID : SB.30
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. Meeting Street Research, LLC		Date of Disbursement MM / DD / YYYY 10 / 13 / 2016	
Mailing Address 413 Pitt Street		FEC Identification Number C [REDACTED] Transaction ID : SB.31 Amount of Each Disbursement this Period 23500.00	
City Mount Pleasant	State SC	Zip Code 29464	Category/ Type 005
Purpose of Disbursement Survey		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Meeting Street Research, LLC		Date of Disbursement MM / DD / YYYY 10 / 13 / 2016	
Mailing Address 413 Pitt Street		FEC Identification Number C [REDACTED] Transaction ID : SB.32 Amount of Each Disbursement this Period 15000.00	
City Mount Pleasant	State SC	Zip Code 29464	Category/ Type 005
Purpose of Disbursement Survey		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. American Media & Advocacy Group		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016	
Mailing Address 815 Slaters Lane		FEC Identification Number C [REDACTED] Transaction ID : SB.49 Amount of Each Disbursement this Period 666371.72 Pre-payment for future independent expenditure	
City Alexandria	State VA	Zip Code 22314	Category/ Type 004
Purpose of Disbursement Media placement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	704871.72
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. The Tarrance Group

Mailing Address 201 N. Union St, Suite 410

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Survey

005

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
10			14			2016			

FEC Identification Number

C []

Transaction ID : SB.33

Amount of Each Disbursement this Period

[] 23419.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Trinity Financial Reporting & Compliance

Mailing Address 13051 Farthingale Dr.

City
Oak Hill

State
VA

Zip Code
20171

Purpose of Disbursement
Accounting and compliance

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
10			14			2016			

FEC Identification Number

C []

Transaction ID : SB.11

Amount of Each Disbursement this Period

[] 10162.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Wiley Rein LLP

Mailing Address 1776 K Street NW

City
Washington

State
DC

Zip Code
20006

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

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2016			

FEC Identification Number

C []

Transaction ID : SB.10

Amount of Each Disbursement this Period

[] 52436.22

Memo Item

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

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

[] 86017.72

[]

**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. Anne Schroeder Mullins & Co.

Full Name (Last, First, Middle Initial)

Mailing Address 4436 Yuma Street, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Communications consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 17 / 2016

FEC Identification Number C

Transaction ID : SB.8

Amount of Each Disbursement this Period 3000.00

Memo Item

B. Basswood Research

Full Name (Last, First, Middle Initial)

Mailing Address Air Rights Center, North Tower
4550 Montgomery Ave. Suite 906

City Bethesda State MD Zip Code 20814

Purpose of Disbursement Survey

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 17 / 2016

FEC Identification Number C

Transaction ID : SB.37

Amount of Each Disbursement this Period 14112.00

Memo Item

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 Spring Hill Road
Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 17 / 2016

FEC Identification Number C

Transaction ID : SB.5

Amount of Each Disbursement this Period 51.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 17163.60

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. North Star Opinion Research, Inc.

Mailing Address 112 North Alfred Street

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Survey

005

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
10			17			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB.34

Amount of Each Disbursement this Period

[REDACTED] 31250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Push Digital

Mailing Address PO Box 7431

City
Columbia

State
SC

Zip Code
29202

Purpose of Disbursement
Media placement

004

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
10			17			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB.45

Amount of Each Disbursement this Period

[REDACTED] 50000.00

Pre-payment for future independent expenditure

Memo Item

Full Name (Last, First, Middle Initial)

C. The Tarrance Group

Mailing Address 201 N. Union St, Suite 410

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Survey

005

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
10			17			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB.38

Amount of Each Disbursement this Period

[REDACTED] 17829.00

Memo Item

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

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

[REDACTED] 99079.00

[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. Wilson Perkins Allen		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016	
Mailing Address 1319 Classen Drive		FEC Identification Number C [REDACTED] Transaction ID : SB.35 Amount of Each Disbursement this Period [REDACTED] 34900.00	
City Oklahoma City	State OK	Zip Code 73103	Category/ Type 005
Purpose of Disbursement Survey			
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. Wilson Perkins Allen		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016	
Mailing Address 1319 Classen Drive		FEC Identification Number C [REDACTED] Transaction ID : SB.36 Amount of Each Disbursement this Period [REDACTED] 29300.00	
City Oklahoma City	State OK	Zip Code 73103	Category/ Type 005
Purpose of Disbursement Survey			
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. Cold Spark Media		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016	
Mailing Address 307 Fourth Ave. Suite 920		FEC Identification Number C [REDACTED] Transaction ID : SB.51 Amount of Each Disbursement this Period [REDACTED] 18308.56 Pre-payment for future independent expenditure	
City Pittsburgh	State PA	Zip Code 15222	Category/ Type 004
Purpose of Disbursement Direct mail			
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] 82508.56
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. NMB Research LLC		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 206 N. Fayette St.		FEC Identification Number C [REDACTED] Transaction ID : SB.39 Amount of Each Disbursement this Period 15500.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Survey		Category/ Type 005
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. North Star Opinion Research, Inc.		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 112 North Alfred Street		FEC Identification Number C [REDACTED] Transaction ID : SB.40 Amount of Each Disbursement this Period 25000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Survey		Category/ Type 005
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. Targeted Victory		Date of Disbursement MM / DD / YYYY 10 / 18 / 2016
Mailing Address 1033 North Fairfax Street Suite 400		FEC Identification Number C [REDACTED] Transaction ID : SB.47 Amount of Each Disbursement this Period 54100.00 Pre-payment for future independent expenditure
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media placement		Category/ Type 004
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).....▶	94600.00
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. American Action Network

Mailing Address 1747 Pennsylvania Ave. NW
5th Floor

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
In-kind payroll/office space/research

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C

Transaction ID : SB.58

Amount of Each Disbursement this Period

65111.00

Memo Item

Full Name (Last, First, Middle Initial)

B. American Media & Advocacy Group

Mailing Address 815 Slaters Lane

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Media placement

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C

Transaction ID : SB.46

Amount of Each Disbursement this Period

1073876.16

Pre-payment for future independent expenditure

Memo Item

Full Name (Last, First, Middle Initial)

C. American Media & Advocacy Group

Mailing Address 815 Slaters Lane

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Media placement

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C

Transaction ID : SB.52

Amount of Each Disbursement this Period

1165688.56

Pre-payment for future independent expenditure

Memo Item

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

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

2304675.72

**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

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

Full Name (Last, First, Middle Initial)

A. Cold Spark Media

Mailing Address 307 Fourth Ave.
Suite 920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement Direct mail

004
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C

Transaction ID : SB.50

Amount of Each Disbursement this Period

17498.56

Memo Item Pre-payment for future independent expenditure

Full Name (Last, First, Middle Initial)

B. Newton Heath LLC

Mailing Address P.O. Box 581

City Alexandria State VA Zip Code 22313

Purpose of Disbursement Survey

005
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C

Transaction ID : SB.41

Amount of Each Disbursement this Period

19372.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NMB Research LLC

Mailing Address 206 N. Fayette St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Survey

005
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C

Transaction ID : SB.44

Amount of Each Disbursement this Period

17500.00

Memo Item

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

54370.56

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. Push Digital

Mailing Address PO Box 7431

City
Columbia

State
SC

Zip Code
29202

Purpose of Disbursement
Media placement

004

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
10			19			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB.48

Amount of Each Disbursement this Period

[REDACTED] 25000.00

Memo Item Pre-payment for future independent expenditure

Full Name (Last, First, Middle Initial)

B. TargetPoint Consulting

Mailing Address 66 Canal Center Plaza
Suite 555

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Survey

005

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
10			19			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB.43

Amount of Each Disbursement this Period

[REDACTED] 2755.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The Tarrance Group

Mailing Address 201 N. Union St, Suite 410

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
Survey

005

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
10			19			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB.42

Amount of Each Disbursement this Period

[REDACTED] 21355.00

Memo Item

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

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

[REDACTED] 49110.00

[REDACTED] 288550.41

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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. ESA Fund

Full Name (Last, First, Middle Initial)

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C00489856

Transaction ID : SB.9

Amount of Each Disbursement this Period: 1600000.00

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

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1600000.00
TOTAL This Period (last page this line number only).....▶	1600000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 37 OF 73
	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 Honold Communications			Nature of Debt (Purpose): Media production
Mailing Address 252 9th Street, NE			
City Washington	State DC	Zip Code 20002	

Outstanding Balance Beginning This Period 0.00		Transaction ID : SB.133	
Amount Incurred This Period 17432.48	Payment This Period 0.00	Outstanding Balance at Close of This Period 17432.48	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RedPrint Strategy			Nature of Debt (Purpose): Media production
Mailing Address P.O. Box 710993			
City Herndon	State VA	Zip Code 20171	

Outstanding Balance Beginning This Period 0.00		Transaction ID : SB.131	
Amount Incurred This Period 26387.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 26387.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RedPrint Strategy			Nature of Debt (Purpose): Media production
Mailing Address P.O. Box 710993			
City Herndon	State VA	Zip Code 20171	

Outstanding Balance Beginning This Period 0.00		Transaction ID : SB.132	
Amount Incurred This Period 16878.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 16878.00	

1) SUBTOTALS This Period This Page (optional)..... ▶	60697.48
2) TOTALS This Period (last page this line number only)..... ▶	60697.48
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	60697.48

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: Whatman Associates
Mailing Address: 6650 Stoffer Rd.
City: Bellville, State: OH, Zip Code: 44813
Purpose of Expenditure: Canvassing, Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, , , Support/Oppose
Office Sought: House, District: 19, State: NY
Calendar Year-To-Date Per Election for Office Sought: 1447060.65
Disbursement For: General 2016

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892
City: Charleston, State: SC, Zip Code: 29413
Purpose of Expenditure: Media placement, Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, , , Support/Oppose
Office Sought: House, District: 19, State: NY
Calendar Year-To-Date Per Election for Office Sought: 1467369.65
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 321859.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Cold Spark Media	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 04 / 2016
Mailing Address 307 Fourth Ave. Suite 920	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17977.56</div> Transaction ID : SB.62 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 27 / 2016
City State Zip Code Pittsburgh PA 15222	
Purpose of Expenditure Direct mail Category/Type 004	
Name of Federal Candidate: Teachout, Zephyr, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: NY
Calendar Year-To-Date Per Election for Office Sought 1485347.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Target Enterprises	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 04 / 2016
Mailing Address 15260 Ventura Blvd. Suite 1240	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">136000.00</div> Transaction ID : SB.63 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 03 / 2016
City State Zip Code Sherman Oaks CA 91403	
Purpose of Expenditure Media placement Category/Type 004	
Name of Federal Candidate: Teachout, Zephyr, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: NY
Calendar Year-To-Date Per Election for Office Sought 1621347.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">153977.56</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Something Else Strategies	Date of Public Distribution/Dissemination 10 / 08 / 2016			
Mailing Address 212 Golden Willow Ct	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19000.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black;">City Easley</td> <td style="width:17%; border-right: 1px solid black;">State SC</td> <td>Zip Code 29642</td> </tr> </table>		City Easley	State SC	Zip Code 29642
City Easley		State SC	Zip Code 29642	
Purpose of Expenditure Media production				
Name of Federal Candidate: Teachout, Zephyr, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: NY			
Calendar Year-To-Date Per Election for Office Sought 1640347.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item Target Enterprises	Date of Public Distribution/Dissemination 10 / 08 / 2016			
Mailing Address 15260 Ventura Blvd. Suite 1240	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">150000.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black;">City Sherman Oaks</td> <td style="width:17%; border-right: 1px solid black;">State CA</td> <td>Zip Code 91403</td> </tr> </table>		City Sherman Oaks	State CA	Zip Code 91403
City Sherman Oaks		State CA	Zip Code 91403	
Purpose of Expenditure Media placement				
Name of Federal Candidate: Teachout, Zephyr, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: NY			
Calendar Year-To-Date Per Election for Office Sought 1790347.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">169000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

10 / 27 / 2016

Signature

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: Target Enterprises
Mailing Address: 15260 Ventura Blvd. Suite 1240
City: Sherman Oaks, State: CA, Zip Code: 91403
Purpose of Expenditure: Media placement
Category/Type: 004
Date of Public Distribution/Dissemination: 10/11/2016
Amount: 944000.00
Transaction ID: SB.66
Date of Disbursement or Obligation: 10/05/2016
Name of Federal Candidate: Teachout, Zephyr, ,
Office Sought: House, District: 19, State: NY
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 2734347.21

Full Name of Payee: Statewide Impact Media LLC
Mailing Address: 131 East 23rd Street, #8G
City: New York, State: NY, Zip Code: 10010
Purpose of Expenditure: Media placement
Category/Type: 004
Date of Public Distribution/Dissemination: 10/13/2016
Amount: 12550.00
Transaction ID: SB.67
Date of Disbursement or Obligation: 10/14/2016
Name of Federal Candidate: Teachout, Zephyr, ,
Office Sought: House, District: 19, State: NY
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 2746897.21

(a) SUBTOTAL of Itemized Independent Expenditures: 956550.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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, ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
---	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Something Else Strategies	Date of Public Distribution/Dissemination 10 / 15 / 2016
Mailing Address 212 Golden Willow Ct	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15000.00</div> Transaction ID : SB.68 Date of Disbursement or Obligation 10 / 17 / 2016
City Easley State SC Zip Code 29642	
Purpose of Expenditure Media production Category/Type 004	
Name of Federal Candidate: Teachout, Zephyr, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought 2761897.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital	Date of Public Distribution/Dissemination 10 / 17 / 2016
Mailing Address P.O. Box 21892	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">81236.00</div> Transaction ID : SB.69 Date of Disbursement or Obligation 10 / 17 / 2016
City Charleston State SC Zip Code 29413	
Purpose of Expenditure Media placement Category/Type 004	
Name of Federal Candidate: Teachout, Zephyr, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought 2843133.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">96236.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Target Enterprises	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016						
Mailing Address 15260 Ventura Blvd. Suite 1240	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">225000.00</div> Transaction ID : SB.70 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Sherman Oaks</td> <td>CA</td> <td>91403</td> </tr> </table>		City	State	Zip Code	Sherman Oaks	CA	91403
City		State	Zip Code				
Sherman Oaks	CA	91403					
Purpose of Expenditure Media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Teachout, Zephyr, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: NY						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Whatman Associates	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 01 / 2016						
Mailing Address 6650 Stoffer Rd.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">151300.00</div> Transaction ID : SB.71 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 26 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Bellville</td> <td>OH</td> <td>44813</td> </tr> </table>		City	State	Zip Code	Bellville	OH	44813
City		State	Zip Code				
Bellville	OH	44813					
Purpose of Expenditure Canvassing							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Zeldin, Lee, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NY						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">376300.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

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: Whatman Associates
Mailing Address: 6650 Stoffer Rd.
City: Bellville, State: OH, Zip Code: 44813
Purpose of Expenditure: Canvassing, Category/Type: 004
Name of Federal Candidate: Throne-Holst, Anna, Support/Oppose
Office Sought: House, District: 01, State: NY
Calendar Year-To-Date Per Election for Office Sought: 302963.33
Disbursement For: General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement, Category/Type: 004
Name of Federal Candidate: Throne-Holst, Anna, Support/Oppose
Office Sought: House, District: 01, State: NY
Calendar Year-To-Date Per Election for Office Sought: 784181.49
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 632518.16
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Conston Communications	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 11 / 2016 </div>
Mailing Address 1758 U St. NW Unit 3	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 8500.00 </div> Transaction ID : SB.74 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 11 / 2016 </div>
City Washington State DC Zip Code 20009	
Purpose of Expenditure Media production Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Throne-Holst, Anna, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">792681.49</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Whatman Associates	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2016 </div>
Mailing Address 6650 Stoffer Rd.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 149250.00 </div> Transaction ID : SB.75 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 26 / 2016 </div>
City Bellville State OH Zip Code 44813	
Purpose of Expenditure Canvassing Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: Katko, John, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 24 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">149613.33</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">157750.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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 M M / D D / Y Y Y Y Y Y
10 / 27 / 2016
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Whatman Associates		Date of Public Distribution/Dissemination 10 / 01 / 2016	
Mailing Address 6650 Stoffer Rd.		Amount 149250.00	
City Bellville	State OH	Zip Code 44813	Transaction ID : SB.76 Date of Disbursement or Obligation 09 / 26 / 2016
Purpose of Expenditure Canvassing		Category/Type 004	
Name of Federal Candidate: Deacon, Colleen , , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>24</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought 298863.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination 10 / 11 / 2016	
Mailing Address 815 Slaters Lane		Amount 192244.30	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB.77 Date of Disbursement or Obligation 10 / 07 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Deacon, Colleen , , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>24</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought 491107.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	341494.30
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	[Empty]
(a) TOTAL Independent Expenditures ▶	[Empty]

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, , ,

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10 / 27 / 2016

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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: RedPrint Strategy
Mailing Address: P.O. Box 710993
City: Herndon, VA, Zip Code: 20171
Purpose of Expenditure: Media production
Category/Type: 004
Date of Public Distribution/Dissemination: 10/11/2016
Amount: 17624.50
Transaction ID: SB.78
Date of Disbursement or Obligation: 10/12/2016
Name of Federal Candidate: Deacon, Colleen,
Office Sought: House, District: 24, State: NY
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 508732.13

Full Name of Payee: Targeted Victory
Mailing Address: 1033 North Fairfax Street, Suite 400
City: Alexandria, VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Date of Public Distribution/Dissemination: 10/11/2016
Amount: 54154.00
Transaction ID: SB.79
Date of Disbursement or Obligation: 10/18/2016
Name of Federal Candidate: Deacon, Colleen,
Office Sought: House, District: 24, State: NY
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 562886.13

(a) SUBTOTAL of Itemized Independent Expenditures: 71778.50
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, ,

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Date

10 / 27 / 2016

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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: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Date of Public Distribution/Dissemination: 10/18/2016
Amount: 192244.30
Transaction ID: SB.80
Date of Disbursement or Obligation: 10/07/2016
Name of Federal Candidate: Deacon, Colleen,
Office Sought: House, District: 24, State: NY
Disbursement For: General 2016

Full Name of Payee: RedPrint Strategy
Mailing Address: P.O. Box 710993
City: Herndon, State: VA, Zip Code: 20171
Purpose of Expenditure: Media production
Category/Type: 004
Date of Public Distribution/Dissemination: 10/18/2016
Amount: 16878.00
Transaction ID: SB.81
Date of Disbursement or Obligation: 10/20/2016
Name of Federal Candidate: Deacon, Colleen,
Office Sought: House, District: 24, State: NY
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 192244.30
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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Date

10 / 27 / 2016

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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: Push Digital
Mailing Address: P.O. Box 21892
City: Charleston, State: SC, Zip Code: 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House, District: 18, State: FL
Amount: 83563.00
Transaction ID: SB.82
Date of Disbursement or Obligation: 09/30/2016
Disbursement For: General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House, District: 18, State: FL
Amount: 1673238.72
Transaction ID: SB.83
Date of Disbursement or Obligation: 10/03/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 1756801.72
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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, , ,

[Electronically Filed]

Date

10 / 27 / 2016

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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Scott Howell & Company			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 04 / 2016		
Mailing Address 3900 Willow St Suite 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15000.00</div>		
City Dallas	State TX	Zip Code 75226			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SB.84 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016		
Name of Federal Candidate: Perkins, Randy, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>18</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 1771801.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016		
Mailing Address P.O. Box 21892			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</div>		
City Charleston	State SC	Zip Code 29413			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SB.85 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Name of Federal Candidate: Perkins, Randy, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>18</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 1796801.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">40000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Scott Howell & Company			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 13 / 2016		
Mailing Address 3900 Willow St Suite 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">18000.00</div>		
City Dallas	State TX	Zip Code 75226	Transaction ID : SB.86 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 13 / 2016		
Purpose of Expenditure Media production		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Perkins, Randy, , ,		
Name of Federal Candidate: Perkins, Randy, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 18 State: FL		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1814801.72</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Mailing Address P.O. Box 21892			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">118072.00</div>		
City Charleston	State SC	Zip Code 29413	Transaction ID : SB.87 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016		
Purpose of Expenditure Media placement		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Gallego, Pete, , ,		
Name of Federal Candidate: Gallego, Pete, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 23 State: TX		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">118435.33</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">136072.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016	
Mailing Address 815 Slaters Lane		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1498000.48</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB.88 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 07 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Gallego, Pete, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>23</u> State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1616435.81</div>		M M / D D / Y Y Y Y Y Y 10 / 11 / 2016	

Full Name of Payee <input type="checkbox"/> Memo Item SRCP Media		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016	
Mailing Address 201 N Union St Suite 200		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">40569.19</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB.89 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016
Purpose of Expenditure Media production		Category/Type 004	
Name of Federal Candidate: Gallego, Pete, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>23</u> State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1657005.00</div>		M M / D D / Y Y Y Y Y Y 10 / 11 / 2016	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">1538569.67</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

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: SRCP Media
Mailing Address: 201 N Union St, Suite 200, Alexandria, VA 22314
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Gallego, Pete, , ,
Office Sought: House, District: 23, State: TX
Amount: 20979.00
Transaction ID: SB.90
Date of Disbursement or Obligation: 10/19/2016
Disbursement For: General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane, Alexandria, VA 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Bera, Ami, , ,
Office Sought: House, District: 07, State: CA
Amount: 952836.80
Transaction ID: SB.91
Date of Disbursement or Obligation: 10/07/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 973815.80
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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Date

10 / 27 / 2016

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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: DMM Media
Mailing Address: 1911 N Fort Myer Drive, Suite 400, Arlington, VA 22209
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Bera, Ami, , , Support/Oppose
Office Sought: House, District: 07, State: CA
Disbursement For: General 2016
Amount: 14804.21
Transaction ID: SB.92

Full Name of Payee: DMM Media
Mailing Address: 1911 N Fort Myer Drive, Suite 400, Arlington, VA 22209
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Bera, Ami, , , Support/Oppose
Office Sought: House, District: 07, State: CA
Disbursement For: General 2016
Amount: 2795.52
Transaction ID: SB.93

(a) SUBTOTAL of Itemized Independent Expenditures: 17599.73
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corp.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
Mailing Address 435 E Main St Suite 250	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 19042.00 </div> Transaction ID : SB.94 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Greenwood</td> <td>IN</td> <td>46143</td> </tr> </table>		City	State	Zip Code	Greenwood	IN	46143
City		State	Zip Code				
Greenwood	IN	46143					
Purpose of Expenditure Media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Bera, Ami, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: CA						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						
989841.86							

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 927513.04 </div> Transaction ID : SB.95 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 07 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure Media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Nolan, Rick, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: MN						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						
927513.04							

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 946555.04 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 946555.04 </div>

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

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
---	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media	Date of Public Distribution/Dissemination 10 / 11 / 2016
Mailing Address 1911 N Fort Myer Drive Suite 400	Amount 14928.67
City Arlington State VA Zip Code 22209	
Purpose of Expenditure Media production Category/Type 004	
Name of Federal Candidate: Nolan, Rick, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought 942441.71	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corp.	Date of Public Distribution/Dissemination 10 / 11 / 2016
Mailing Address 435 E Main St Suite 250	Amount 83774.00
City Greenwood State IN Zip Code 46143	
Purpose of Expenditure Media placement Category/Type 004	
Name of Federal Candidate: Nolan, Rick, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought 1026215.71	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	98702.67
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) 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, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media		Date of Public Distribution/Dissemination 10 / 11 / 2016	
Mailing Address 1911 N Fort Myer Drive Suite 400		Amount 2867.54	
City Arlington	State VA	Zip Code 22209	Transaction ID : SB.98 Date of Disbursement or Obligation 10 / 13 / 2016
Purpose of Expenditure Media production		Category/Type 004	
Name of Federal Candidate: Nolan, Rick, ,		Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 1029083.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination 10 / 18 / 2016	
Mailing Address 815 Slaters Lane		Amount 743083.44	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB.99 Date of Disbursement or Obligation 10 / 07 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Nolan, Rick, ,		Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN	
Calendar Year-To-Date Per Election for Office Sought 1772166.69		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	745950.98
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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Crosby, Caleb, ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 815 Slaters Lane	Amount <input type="text"/>
City Alexandria State VA Zip Code 22314	Transaction ID : SB.100
Purpose of Expenditure Media placement Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nolan, Rick, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1911 N Fort Myer Drive Suite 400	Amount <input type="text"/>
City Arlington State VA Zip Code 22209	Transaction ID : SB.101
Purpose of Expenditure Media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nolan, Rick, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Mailing Address 1911 N Fort Myer Drive Suite 400		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2789.54</div>	
City Arlington	State VA	Zip Code 22209	Transaction ID : SB.102 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016
Purpose of Expenditure Media production		Category/Type 004	
Name of Federal Candidate: Nolan, Rick, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: MN	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1834851.62</div>			

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016	
Mailing Address 815 Slaters Lane		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">992189.70</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB.103 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 07 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Rosen, Jacky, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">992553.03</div>			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">994979.24</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item RedPrint Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Mailing Address P.O. Box 710993			Amount 17425.50		
City Herndon	State VA	Zip Code 20171			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SB.104 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support Rosen, Jacky, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1009978.53			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Targeted Victory			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016		
Mailing Address 1033 North Fairfax Street Suite 400			Amount 39908.00		
City Alexandria	State VA	Zip Code 22314			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SB.105 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support Rosen, Jacky, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 1049886.53			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	57333.50
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

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
American Media & Advocacy Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Media placement Category/
Type
004
Date of Public Distribution/Dissemination
10 / 12 / 2016
Amount
60002.44
Transaction ID : SB.106
Date of Disbursement or Obligation
10 / 12 / 2016

Name of Federal Candidate:
Rosen, Jacky, , ,
Support Oppose
Office Sought:
House District: 03
President Senate State: NV
Calendar Year-To-Date
Per Election for Office Sought
1109888.97
Disbursement For:
Primary General
2016 Other (specify)

Full Name of Payee
American Media & Advocacy Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Media placement Category/
Type
004
Date of Public Distribution/Dissemination
10 / 18 / 2016
Amount
993379.70
Transaction ID : SB.107
Date of Disbursement or Obligation
10 / 07 / 2016

Name of Federal Candidate:
Rosen, Jacky, , ,
Support Oppose
Office Sought:
House District: 03
President Senate State: NV
Calendar Year-To-Date
Per Election for Office Sought
2103268.67
Disbursement For:
Primary General
2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
1053382.14
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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, , ,
[Electronically Filed]
Date
10 / 27 / 2016
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">59877.48</div>		
City Alexandria	State VA	Zip Code 22314			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SB.108 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rosen, Jacky, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 2163146.15			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item RedPrint Strategy Independent expenditure paid after dissemination. See Schedule D			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Mailing Address P.O. Box 710993			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">26387.00</div>		
City Herndon	State VA	Zip Code 20171			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SB.109 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rosen, Jacky, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 2189533.15			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">59877.48</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">595156.00</div> Transaction ID : SB.110 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 07 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Alexandria</td> <td style="padding: 2px;">VA</td> <td style="padding: 2px;">22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure Media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Bennett, LuAnn, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>VA</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">595519.33</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corp.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
Mailing Address 435 E Main St Suite 250	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">83928.00</div> Transaction ID : SB.111 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Greenwood</td> <td style="padding: 2px;">IN</td> <td style="padding: 2px;">46143</td> </tr> </table>		City	State	Zip Code	Greenwood	IN	46143
City		State	Zip Code				
Greenwood	IN	46143					
Purpose of Expenditure Media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Bennett, LuAnn, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>VA</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">679447.33</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">679084.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item RedPrint Strategy	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 10 / 11 / 2016 </div>			
Mailing Address P.O. Box 710993	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 15926.50 </div>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Herndon</td> <td style="width:17%;">State VA</td> <td style="width:50%;">Zip Code 20171</td> </tr> </table>		City Herndon	State VA	Zip Code 20171
City Herndon		State VA	Zip Code 20171	
Purpose of Expenditure Media production				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Bennett, LuAnn, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>VA</u>			
Calendar Year-To-Date Per Election for Office Sought / / 695373.83	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> 10 / 18 / 2016 </div>			
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 593031.00 </div>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Alexandria</td> <td style="width:17%;">State VA</td> <td style="width:50%;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure Media placement				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Bennett, LuAnn, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>VA</u>			
Calendar Year-To-Date Per Election for Office Sought / / 1288404.83	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 608957.50 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

 / / 10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corp.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Mailing Address 435 E Main St Suite 250			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>		
City Greenwood	State IN	Zip Code 46143			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SB.114 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Eggman, Michael, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 10 State: CA		
Calendar Year-To-Date Per Election for Office Sought 50000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Honold Communications Independent expenditure paid after dissemination. See Schedule D			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016		
Mailing Address 252 9th Street NE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17432.48</div>		
City Washington	State DC	Zip Code 20002			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SB.115 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Eggman, Michael, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 10 State: CA		
Calendar Year-To-Date Per Election for Office Sought 67432.48			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

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Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

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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: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Eggman, Michael, Support/Oppose
Office Sought: House, District: 10, State: CA
Amount: 1614177.60
Transaction ID: SB.116
Date of Disbursement or Obligation: 10/14/2016
Disbursement For: General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, Support/Oppose
Office Sought: House, District: 03, State: IA
Amount: 329403.36
Transaction ID: SB.117
Date of Disbursement or Obligation: 10/14/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 1943580.96
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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Date

10 / 27 / 2016

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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: The Prosper Group Corp.
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, , ,
Office Sought: House, District: 03, State: IA
Amount: 88575.00
Transaction ID: SB.118
Date of Disbursement or Obligation: 10/18/2016
Disbursement For: General 2016

Full Name of Payee: DMM Media
Mailing Address: 1911 N Fort Myer Drive, Suite 400, Arlington, VA 22209
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, , ,
Office Sought: House, District: 03, State: IA
Amount: 14918.46
Transaction ID: SB.119
Date of Disbursement or Obligation: 10/19/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 103493.46
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 18 / 2016</div>
Mailing Address 1911 N Fort Myer Drive Suite 400	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">2813.32</div>
City State Zip Code Arlington VA 22209	
Purpose of Expenditure Media production Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Mowrer, Jim, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: IA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">435710.14</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item SRCP Media	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 19 / 2016</div>
Mailing Address 201 N Union St Suite 200	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">19783.00</div>
City State Zip Code Alexandria VA 22314	
Purpose of Expenditure Media production Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Heinz, Matt, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: AZ
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">19783.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">22596.32</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

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Crosby, Caleb, , ,

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Date

M M / D D / Y Y Y Y Y Y

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 19 / 2016</div>			
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">552567.60</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure Media placement	Category/Type 004			
Name of Federal Candidate: Heinz, Matt, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">572350.60</div>	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____				

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 19 / 2016</div>			
Mailing Address P.O. Box 21892	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">42000.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Charleston</td> <td style="width:17%; padding: 2px;">State SC</td> <td style="width:50%; padding: 2px;">Zip Code 29413</td> </tr> </table>		City Charleston	State SC	Zip Code 29413
City Charleston		State SC	Zip Code 29413	
Purpose of Expenditure Media placement	Category/Type 004			
Name of Federal Candidate: Heinz, Matt, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">614350.60</div>	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____				

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">594567.60</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

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Crosby, Caleb, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

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: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Date of Public Distribution/Dissemination: 10/18/2016
Amount: 663412.92
Transaction ID: SB.124
Date of Disbursement or Obligation: 10/17/2016
Name of Federal Candidate: Ashford, Brad, ,
Office Sought: House, District: 02, State: NE
Disbursement For: General 2016

Full Name of Payee: Something Else Strategies
Mailing Address: 212 Golden Willow Ct
City: Easley, State: SC, Zip Code: 29642
Purpose of Expenditure: Media production
Category/Type: 004
Date of Public Distribution/Dissemination: 10/18/2016
Amount: 19000.00
Transaction ID: SB.125
Date of Disbursement or Obligation: 10/17/2016
Name of Federal Candidate: Ashford, Brad, ,
Office Sought: House, District: 02, State: NE
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 682412.92
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, ,

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Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital	Date of Public Distribution/Dissemination 10 / 18 / 2016			
Mailing Address P.O. Box 21892	Amount 63249.99			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Charleston</td> <td style="width:17%; border-bottom: 1px solid black;">State SC</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 29413</td> </tr> </table>		City Charleston	State SC	Zip Code 29413
City Charleston		State SC	Zip Code 29413	
Purpose of Expenditure Media placement				
Name of Federal Candidate: Ashford, Brad, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE			
Calendar Year-To-Date Per Election for Office Sought	746026.25			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶				

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination 10 / 18 / 2016			
Mailing Address 815 Slaters Lane	Amount 1938724.04			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Alexandria</td> <td style="width:17%; border-bottom: 1px solid black;">State VA</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure Media placement				
Name of Federal Candidate: Santarsiero, Steve, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA			
Calendar Year-To-Date Per Election for Office Sought	1939087.37			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶				

(a) SUBTOTAL of Itemized Independent Expenditures ▶	2001974.03
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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Crosby, Caleb, , ,
Signature

[Electronically Filed]

Date 10 / 27 / 2016

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital	Date of Public Distribution/Dissemination 10 / 18 / 2016			
Mailing Address P.O. Box 21892	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">59169.00</div> Transaction ID : SB.128 Date of Disbursement or Obligation 10 / 17 / 2016			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black;">City Charleston</td> <td style="width:17%; border-right: 1px solid black;">State SC</td> <td>Zip Code 29413</td> </tr> </table>		City Charleston	State SC	Zip Code 29413
City Charleston		State SC	Zip Code 29413	
Purpose of Expenditure Media placement				
Name of Federal Candidate: Santarsiero, Steve, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			
1998256.37				

Full Name of Payee <input type="checkbox"/> Memo Item Scott Howell & Company	Date of Public Distribution/Dissemination 10 / 18 / 2016			
Mailing Address 3900 Willow St Suite 200	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15500.00</div> Transaction ID : SB.129 Date of Disbursement or Obligation 10 / 18 / 2016			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black;">City Dallas</td> <td style="width:17%; border-right: 1px solid black;">State TX</td> <td>Zip Code 75226</td> </tr> </table>		City Dallas	State TX	Zip Code 75226
City Dallas		State TX	Zip Code 75226	
Purpose of Expenditure Media production				
Name of Federal Candidate: Santarsiero, Steve, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			
2013756.37				

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;">74669.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

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Crosby, Caleb, , ,

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Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Whatman Associates	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2016						
Mailing Address 6650 Stoffer Rd.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">299900.00</div> Transaction ID : SB.130 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 04 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Bellville</td> <td>OH</td> <td>44813</td> </tr> </table>		City	State	Zip Code	Bellville	OH	44813
City		State	Zip Code				
Bellville	OH	44813					
Purpose of Expenditure Canvassing							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Plumb, John, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 23 State: NY						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">299900.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y						
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		City	State	Zip Code			
City		State	Zip Code				
Purpose of Expenditure							
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">299900.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">19010478.97</div>

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

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature