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

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼		
Congressional Leadership Fund		C C00504530
M M / D D / Y Y Y Y		
Check if 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee Nebo Media		Date of Public Distribution/Dissemination
		09 11 2018
Mailing Address PO Box 9825		Amount
City State 2	Zip Code	269902.48
Arlington VA :	22219	Transaction ID: 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement	Category/ Type 004	09 06 Y 2018
Name of Federal Candidate	Support Office	e Sought:
Rouda, Harley, , ,	X Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	Disbu 2018	ursement For: Primary X General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City State 2	Zip Code	
Oily State 2	zip code	
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
	Type	
Name of Federal Candidate		e Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbu	Other (enceity)
		Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	269902.48
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	269902.48
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, , , [Electronic Signature	cally Filed] Date	09 13 2018
Signature		