

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

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 Nebo Media
Mailing Address PO Box 9825
City Arlington State VA Zip Code 22219
Purpose of Expenditure Media Placement Category/Type 004

Date of Public Distribution/Dissemination 10 / 17 / 2018
Amount 212100.00
Transaction ID : 001
Date of Disbursement or Obligation 10 / 16 / 2018

Name of Federal Candidate Finkenauer, Abby, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 214194.61

Office Sought: House District: 01
State: IA
Disbursement For: General 2018

Full Name of Payee Jamestown Associates
Mailing Address 154 Route 79 North
City Marlboro State NJ Zip Code 07746
Purpose of Expenditure Media Production Category/Type 004

Date of Public Distribution/Dissemination 10 / 17 / 2018
Amount 11241.00
Transaction ID : 002
Date of Disbursement or Obligation 10 / 17 / 2018

Name of Federal Candidate Finkenauer, Abby, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 225435.61

Office Sought: House District: 01
State: IA
Disbursement For: General 2018

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 223341.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Crosby, Caleb, , [Electronically Filed] Date 10 / 19 / 2018
Signature

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NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
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Full Name of Payee Nebo Media
Mailing Address PO Box 9825
City Arlington State VA Zip Code 22219
Purpose of Expenditure Media Placement Category/Type 004

Date of Public Distribution/Dissemination 10/17/2018
Amount 199588.61
Transaction ID : 003
Date of Disbursement or Obligation 10/18/2018

Name of Federal Candidate Finkenauer, Abby, ,
Support Oppose
Office Sought: House District: 01
President Senate State: IA

Disbursement For: Primary General 2018
Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate
Support Oppose
Office Sought: House District:
President Senate State:

Disbursement For: Primary General
Other (specify)

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: Primary General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 199588.61, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 422929.61

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 10/19/2018
Signature