

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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2016 through 09 / 30 / 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 10 / 15 / 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)

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="6037058.47"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="31328952.00"/>	<input type="text" value="37346205.52"/>
(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="37366010.47"/>	<input type="text" value="38211998.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4027186.64"/>	<input type="text" value="4873175.11"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="33338823.83"/>	<input type="text" value="33338823.83"/>
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="0.00"/>	

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).....	31298592.00	37249909.15
(ii) Unitemized	360.00	360.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	31298952.00	37250269.15
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	30000.00	95000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	31328952.00	37345269.15
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)).....▶	31328952.00	37346205.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	31328952.00	37346205.52

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2791225.99	3151290.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2791225.99	3151290.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	85000.00	395000.00
24. Independent Expenditures (use Schedule E)	1150960.65	1326884.65
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)) ..	4027186.64	4873175.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4027186.64	4873175.11

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)	31328952.00	37345269.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31328952.00	37345269.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2791225.99	3151290.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	936.37
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2791225.99	3150354.09

**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 6 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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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. MCINERNEY, THOMAS, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 MANITOU CT.
 City WESTPORT State CT Zip Code 06880-6006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUFF POINT ASSOCIATES Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 07 / 05 / 2016
Transaction ID : SA11A.1206
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

B. 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) BERKSHIRE PARTNERS LLC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 07 / 13 / 2016
Transaction ID : SA11A.1207
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. JOHNSON, CHARLES, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 S. OCEAN BLVD
 City PALM BEACH State FL Zip Code 33480-5016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.1209
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450000.00
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"/> 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. MCNAIR, ROBERT, C., , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address NRG STADIUM
 TWO NRG PARK
 City HOUSTON State TX Zip Code 77054-1573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOUSTON TEXANS Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100000.00

Date of Receipt 07 / 19 / 2016
Transaction ID : SA11A.1208
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

B. CAMERON, RONALD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 21440
 City LITTLE ROCK State AR Zip Code 72221-1440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOUNTAIRE CORP. Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : SA11A.1210
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

C. GRUNDHOEFER, MARY JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 STAG MEADOW
 City SAN ANTONIO State TX Zip Code 78248-1346
 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 ▼ 2500.00

Date of Receipt 07 / 23 / 2016
Transaction ID : SA11A.1211
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2002500.00
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"/> 15
	<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. CAMERON, RONALD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 21440
 City LITTLE ROCK State AR Zip Code 72221-1440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOUNTAIRE CORP. Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000000.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.1213
 Amount of Each Receipt this Period 1000000.00
 Memo Item
CONTRIBUTION

B. CHILDS, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 SAGO PALM RD.
 City VERO BEACH State FL Zip Code 32963-3702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J.W. CHILDS ASSOCIATES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 94200.00

Date of Receipt 07 / 25 / 2016
Transaction ID : SA11A.1212
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

C. 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 ▼ 250000.00

Date of Receipt 07 / 27 / 2016
Transaction ID : SA11A.1214
 Amount of Each Receipt this Period 250000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300000.00
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. CAWOOD, FRANK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 EDGEWATER DR.
 402
 City DUNEDIN State FL Zip Code 34698-6914
 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 ▼ 5000.00

Date of Receipt **07 / 27 / 2016**
Transaction ID : SA11A.1215
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. GRIFFIN, KENNETH, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 S DEARBORN ST
 City CHICAGO State IL Zip Code 60603-5517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITADEL ASSET MANAGEMENT Occupation (for Individual) CHIEF EXECUTIVE OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt **08 / 03 / 2016**
Transaction ID : SA11A.1216
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

C. COX, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 356 WORTH AVENUE
 City PALM BEACH State FL Zip Code 33480-4617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **08 / 05 / 2016**
Transaction ID : SA11A.1219
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1015000.00
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 10 OF 73
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. KOVNER, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 PARK AVENUE
 11TH FLOOR
 City NEW YORK State NY Zip Code 10022-1606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAXTON ALTERNATIVE MANAGEMENT Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 05 / 2016
Transaction ID : SA11A.1218
 Amount of Each Receipt this Period 250000.00
 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 ▼ 500000.00

Date of Receipt 08 / 10 / 2016
Transaction ID : SA11A.1220
 Amount of Each Receipt this Period 500000.00
 Memo Item
CONTRIBUTION

C. DEVON ENERGY PRODUCTION CO LP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 NORTH BROADWAY
 City OKLAHOMA CITY State OK Zip Code 73102-9213
 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 ▼ 500000.00

Date of Receipt 08 / 11 / 2016
Transaction ID : SA11A.1221
 Amount of Each Receipt this Period 500000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1250000.00
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. ETC CAPITAL LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38955 HILLS TECH DR.
 City FARMINGTON HILLS State MI Zip Code 48331-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 16 / 2016
Transaction ID : SA11A.1222
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

B. 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 ▼ 200000.00

Date of Receipt 08 / 17 / 2016
Transaction ID : SA11A.1223
 Amount of Each Receipt this Period 200000.00
 Memo Item
CONTRIBUTION

C. DAVIS, JAMES, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 GUEST STREET
 City BRIGHTON State MA Zip Code 02135-2028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW BALANCE ATHLETIC SHOE, INC. CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 08 / 18 / 2016
Transaction ID : SA11A.1224
 Amount of Each Receipt this Period 150000.00
 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 12 OF 73
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. BYNUM, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6306 W MACLAURIN DR.
 City TAMPA State FL Zip Code 33647-1162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TFS HOLDINGS, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.1228
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

B. PURCELL, PHILLIP, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 N. SAGEWOOD DR. SUITE H-110
 City PARK CITY State UT Zip Code 84098-7502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL INVESTORS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 58900.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11A.1226
 Amount of Each Receipt this Period 58900.00
 Memo Item
 CONTRIBUTION

C. HERRO, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 E. WALTON PL. NO. 31A
 City CHICAGO State IL Zip Code 60611-1971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS ASSOCIATES Occupation (for Individual) INVESTMENT MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 24 / 2016
Transaction ID : SA11A.1234
 Amount of Each Receipt this Period 100000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	161400.00
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"/> 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. ADELSON, MIRIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3355 LAS VEGAS BLVD. SOUTH

City LAS VEGAS	State NV	Zip Code 89109-8941
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ADELSON DRUG CLINIC	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000000.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.1237

Amount of Each Receipt this Period
10000000.00

Memo Item
CONTRIBUTION

B. ADELSON, SHELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3355 LAS VEGAS BLVD. SOUTH

City LAS VEGAS	State NV	Zip Code 89109-8941
-------------------	-------------	------------------------

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

Name of Employer (for Individual) LAS VEGAS SANDS, INC.	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000000.00

Date of Receipt
 08 / 29 / 2016
Transaction ID : SA11A.1236

Amount of Each Receipt this Period
10000000.00

Memo Item
CONTRIBUTION

C. SCHLOEMER, JAMES, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W134N8675 EXECUTIVE PARKWAY

City MENOMONEE FALLS	State WI	Zip Code 53051-3310
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) CONTINENTAL PROPERTIES COMPANY, INC.	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 08 / 30 / 2016
Transaction ID : SA11A.1238

Amount of Each Receipt this Period
20000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	20020000.00
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. RUSSELL, THOMAS, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7134 S. YALE SUITE 540
 City TULSA State OK Zip Code 74136-6340
 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 ▼ 500000.00

Date of Receipt 09 / 02 / 2016
Transaction ID : SA11A.1239
 Amount of Each Receipt this Period 500000.00
 Memo Item CONTRIBUTION

B. COURI INSURANCE AGENCY, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 379 WEST MAIN STREET
 City WAUKESHA State WI Zip Code 53186-4613
 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 09 / 03 / 2016
Transaction ID : SA11A.1240
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. CASTELLINI, ROBERT, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 312 ELM STREET SUITE 2600
 City CINCINNATI State OH Zip Code 45202-2728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CASTELLINI MANAGEMENT COMPANY Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.1242
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575000.00
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)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. DUCHOSSOIS, CRAIG, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 N. LARCH AVENUE
 City ELMHURST State IL Zip Code 60126-1114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE DUCHOSSOIS GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.1243
 Amount of Each Receipt this Period 500000.00
 Memo Item
 CONTRIBUTION

B. HARRIS, JOSHUA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 MADISON AVE., 26TH FLOOR
 City NEW YORK State NY Zip Code 10022-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APOLLO GLOBAL MANAGEMENT Occupation (for Individual) CO-FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.1244
 Amount of Each Receipt this Period 50000.00
 Memo Item
 CONTRIBUTION

C. MARCUS, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1266 WEST PACES FERRY ROAD SUITE 615
 City ATLANTA State GA Zip Code 30327-2306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MARCUS FOUNDATION Occupation (for Individual) PHILANTHROPIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt 09 / 06 / 2016
Transaction ID : SA11A.1241
 Amount of Each Receipt this Period 500000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050000.00
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)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. HUGIN, ROBERT, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19 ESSEX ROAD
City SUMMIT State NJ Zip Code 07901-2801
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Occupation (for Individual)
CELGENE CORP. EXECUTIVE CHAIRMAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 08 / 2016
Transaction ID : SA11A.1245
Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

B. KWIK TRIP INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 2107
1626 OAK ST.
City LA CROSE State WI Zip Code 54602-2107
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 09 / 09 / 2016
Transaction ID : SA11A.1246
Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. CHILDS, JOHN, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 165 SAGO PALM RD.
City VERO BEACH State FL Zip Code 32963-3702
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Occupation (for Individual)
J.W. CHILDS ASSOCIATES CHAIRMAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 94200.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.1247
Amount of Each Receipt this Period 44200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 169200.00
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 17 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. RYAN, PATRICK, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 GREEN BAY ROAD, PMB 309
 City WINNETKA State IL Zip Code 60093-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RYAN SPECIALTY GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.1248
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. BAUM, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8305 SUMMERWOOD DRIVE
 City AUSTIN State TX Zip Code 78759-8224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IAEBM LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 14 / 2016
Transaction ID : SA11A.1200
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.1253
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150500.00
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 18 OF 73
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. BDW HOLDINGS, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N4365 STATE HIGHWAY 73
 City COLUMBUS State WI Zip Code 53925-
 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 ▼ 5000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.1254
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. GROFF FAMILY TRUST
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9832 CALVIN AVENUE
 City NORTHRIDGE State CA Zip Code 91324-1619
 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 ▼ 150000.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.1252
 Amount of Each Receipt this Period 150000.00
 Memo Item
CONTRIBUTION

C. JOYCE, CHARLES, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2971 RTE. 417
 City WELLSVILLE State NY Zip Code 14895-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 OTIS EASTERN SERVICE, LLC EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.1256
 Amount of Each Receipt this Period 100000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255000.00
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 19 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. 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) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11A.1255
 Amount of Each Receipt this Period 600000.00
 Memo Item
 CONTRIBUTION

B. KLONDIKE PROPERTIES LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W7839 STATE RD. 81
 City MONROE State WI Zip Code 53566-9179
 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 ▼ 20000.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.1257
 Amount of Each Receipt this Period 20000.00
 Memo Item
 CONTRIBUTION

C. ASNESS, CLIFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 3RD AVE. FLOOR 11
 City NEW YORK State NY Zip Code 10017-2716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AQR CAPITAL MANAGEMENT Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 167000.00

Date of Receipt 09 / 23 / 2016
Transaction ID : SA11A.1260
 Amount of Each Receipt this Period 167000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	787000.00
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 20 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. WEISS, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9025 KEITH AVENUE

City WEST HOLLYWOOD	State CA	Zip Code 90069-5539
------------------------	-------------	------------------------

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

Name of Employer (for Individual) PT PROTELINDO	Occupation (for Individual) SENIOR ADVISOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.1201

Amount of Each Receipt this Period
2700.00

Memo Item
CONTRIBUTION

B. C.V. STARR & COMPANY, INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 399 PARK AVENUE
8TH FLOOR

City NEW YORK	State NY	Zip Code 10022-4877
------------------	-------------	------------------------

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 ▼
150000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.1261

Amount of Each Receipt this Period
150000.00

Memo Item
CONTRIBUTION

C. UNITED ASSOCIATION OF JOURNEYMAN AND APPRENTICES OF THE PIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address THREE PARK PLACE

City ANNAPOLIS	State MD	Zip Code 21401-3687
-------------------	-------------	------------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : SA11A.1263

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	252700.00
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 21 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. DIMENNA, JOSEPH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 EAST 67TH ST.
 City NEW YORK State NY Zip Code 10065-5805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ZA MANAGEMENT SERVICES Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.1265
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

B. SINGER, PAUL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 W 57TH ST 30TH FLOOR
 City NEW YORK State NY Zip Code 10019-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELLIOTT MANAGEMENT CORP. Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : SA11A.1264
 Amount of Each Receipt this Period 500000.00
 Memo Item
CONTRIBUTION

C. CRAFT, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 S. BOULDER AVE SUITE 400
 City TULSA State OK Zip Code 74119-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIANCE COAL LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.1266
 Amount of Each Receipt this Period 125000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	675000.00
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 22 OF 73
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. FULLER, ROBERT, G., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 MAPLE RIDGE DRIVE
 City WINTHROP State ME Zip Code 04364-3427
 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 ▼ 15000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.1268
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

B. AIRLINES FOR AMERICA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1275 PENNSYLVANIA AVE NW SUITE 1300
 City WASHINGTON State DC Zip Code 20004-2450
 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 09 / 29 / 2016
Transaction ID : SA11A.1267
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. ALLIANCE HOLDINGS GP, L.P.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 S. BOULDER AVE SUITE 400
 City TULSA State OK Zip Code 74119-
 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 ▼ 475000.00

Date of Receipt 09 / 29 / 2016
Transaction ID : SA11A.1269
 Amount of Each Receipt this Period 475000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	590000.00
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 23 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. KING, JAMES, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1033 SKOKIE BLVD.
 SUITE 660
 City NORTHBROOK State IL Zip Code 60062-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIVE CROWNS CAPITAL LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.1271
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. American Action Network
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1747 Pennsylvania Ave. NW
 5th Floor
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 323109.15

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.1280
 Amount of Each Receipt this Period 192792.00
 Memo Item
 In kind-payroll/office space/research

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	195292.00
TOTAL This Period (last page this line number only).....	31298592.00

**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 24 OF 73
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC

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

Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG	State IL	Zip Code 60173-4973
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00255752

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2016

Transaction ID : SA11C.1225

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. DIRECT SUPPLY INC. PARTNERS PAC

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

Mailing Address 6767 N. INDUSTRIAL RD.

City MILWAUKEE	State WI	Zip Code 53223-5815
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00409516

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11C.1259

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	30000.00
TOTAL This Period (last page this line number only).....▶	30000.00

**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. American Express		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address PO Box 53852		FEC Identification Number C [REDACTED] Transaction ID : SB.1 Amount of Each Disbursement this Period [REDACTED] 289.30
City Phoenix	State AZ	Zip Code 85072
Purpose of Disbursement Merchant fee		Category/Type 003
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. PCI Payment Solutions		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016
Mailing Address 902 Chinguapin		FEC Identification Number C [REDACTED] Transaction ID : SB.2 Amount of Each Disbursement this Period [REDACTED] 120.20
City McLean	State VA	Zip Code 22102
Purpose of Disbursement Merchant fee		Category/Type 003
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. Shields, Mike, , ,		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB.84 Amount of Each Disbursement this Period [REDACTED] 801.97
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Travel - see memo entry		Category/Type 002
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] 1211.47

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)

Grid for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Form A: Nemaocolin Woodlands Resort. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID: SB.85, Amount of Each Disbursement: 801.97, and Memo Item checkbox.

Form B: Anne Schroeder Mullins & Co. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID: SB.17, Amount of Each Disbursement: 1000.00, and Memo Item checkbox.

Form C: CMDI. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID: SB.27, Amount of Each Disbursement: 500.00, and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 1500.00
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. E.C. Maruggi Incorporated		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016	
Mailing Address 660 South Howell St.		FEC Identification Number C [REDACTED] Transaction ID : SB.16 Amount of Each Disbursement this Period [REDACTED] 1000.00	
City St. Paul	State MN	Zip Code 55116	Category/ Type 001
Purpose of Disbursement Business consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Piccirilli Dorsey		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016	
Mailing Address 502 Rock Spring Rd		FEC Identification Number C [REDACTED] Transaction ID : SB.42 Amount of Each Disbursement this Period [REDACTED] 38.00	
City Bel Air	State MD	Zip Code 21014	Category/ Type 001
Purpose of Disbursement Web hosting			
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. Red Edge		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016	
Mailing Address 2300 Clarendon Blvd. #901		FEC Identification Number C [REDACTED] Transaction ID : SB.43 Amount of Each Disbursement this Period [REDACTED] 7455.00	
City Arlington	State VA	Zip Code 22201	Category/ Type 001
Purpose of Disbursement Website design and development			
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] 8493.00
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. Red Elephant Strategy LLC

Mailing Address 2205 Main Line Blvd

City
Alexandria

State
VA

Zip Code
22301

Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number

C []

Transaction ID : SB.15

Amount of Each Disbursement this Period

[] 13151.92

Memo Item

Full Name (Last, First, Middle Initial)

B. Trinity Financial Reporting & Compliance

Mailing Address P.O. Box 710993

City
Herndon

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

MM / DD / YYYY
07 / 15 / 2016

FEC Identification Number

C []

Transaction ID : SB.31

Amount of Each Disbursement this Period

[] 3300.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Piryx Inc.

Mailing Address 995 Market Street

City
San Francisco

State
CA

Zip Code
94103

Purpose of Disbursement
Merchant fee

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2016

FEC Identification Number

C []

Transaction ID : SB.3

Amount of Each Disbursement this Period

[] 150.00

Memo Item

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

[] 16601.92

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. Capitol Computer Exchange

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement
Computer services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.44

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Wiley Rein LLP

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Legal services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.32

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Anne Schroeder Mullins & Co.

Mailing Address 4436 Yuma Street, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Communications consulting

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.18

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. PCI Payment Solutions

Full Name (Last, First, Middle Initial)

Mailing Address 902 Chinquapin

City McLean State VA Zip Code 22102

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB.4

Amount of Each Disbursement this Period: 45.00

Memo Item

B. First National Bank

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2557

City Omaha State NE Zip Code 68103

Purpose of Disbursement Credit card-see memo entries

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB.86

Amount of Each Disbursement this Period: 4338.02

Memo Item

C. Microsoft

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Computer services

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB.88

Amount of Each Disbursement this Period: 188.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4383.02

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. Morton's

Full Name (Last, First, Middle Initial)

Mailing Address 1510 W. Loop South

City Houston State TX Zip Code 77027

Purpose of Disbursement Travel meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB.87

Amount of Each Disbursement this Period: 3841.71

Memo Item

B. Pantheon

Full Name (Last, First, Middle Initial)

Mailing Address 717 California Street

City San Francisco State CA Zip Code 94108

Purpose of Disbursement Website development

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB.89

Amount of Each Disbursement this Period: 211.47

Memo Item

C. 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: 08 / 08 / 2016

FEC Identification Number: C

Transaction ID : SB.19

Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2000.00

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. E.C. Maruggi Incorporated		Date of Disbursement MM / DD / YYYY 08 / 09 / 2016	
Mailing Address 660 South Howell St.		FEC Identification Number C [] Transaction ID : SB.20 Amount of Each Disbursement this Period [] 1000.00	
City St. Paul	State MN	Zip Code 55116	Category/ Type 001
Purpose of Disbursement Business consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Tray - Printing, Mailing, Logistics		Date of Disbursement MM / DD / YYYY 08 / 10 / 2016	
Mailing Address PO Box 1360		FEC Identification Number C [] Transaction ID : SB.82 Amount of Each Disbursement this Period [] 143.43	
City Glen Burnie	State MD	Zip Code 21061	Category/ Type 001
Purpose of Disbursement Stationery			
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. Tray - Printing, Mailing, Logistics		Date of Disbursement MM / DD / YYYY 08 / 10 / 2016	
Mailing Address PO Box 1360		FEC Identification Number C [] Transaction ID : SB.83 Amount of Each Disbursement this Period [] 143.47	
City Glen Burnie	State MD	Zip Code 21061	Category/ Type 001
Purpose of Disbursement Stationery			
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).....▶	[] 1286.90
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 Donor database subscription

Category/Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	6

FEC Identification Number

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

Memo Item

Full Name (Last, First, Middle Initial)

B. Piccirilli Dorsey

Mailing Address 502 Rock Spring Rd

City Bel Air State MD Zip Code 21014

Purpose of Disbursement Web hosting

Category/Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	6

FEC Identification Number

Transaction ID : SB.46
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Trinity Financial Reporting & Compliance

Mailing Address P.O. Box 710993

City Herndon State VA Zip Code 20171

Purpose of Disbursement Accounting and compliance

Category/Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	6

FEC Identification Number

Transaction ID : SB.34
 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. Wiley Rein LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement Legal services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2016

FEC Identification Number: C

Transaction ID : SB.33

Amount of Each Disbursement this Period: 34987.20

Memo Item

B. Red Edge

Full Name (Last, First, Middle Initial)

Mailing Address 2300 Clarendon Blvd. #901

City Arlington State VA Zip Code 22201

Purpose of Disbursement Website design and development

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 19 / 2016

FEC Identification Number: C

Transaction ID : SB.47

Amount of Each Disbursement this Period: 12678.75

Memo Item

C. Piryx Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 995 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Merchant fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2016

FEC Identification Number: C

Transaction ID : SB.5

Amount of Each Disbursement this Period: 150.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 47815.95

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. Piryx Inc.

Mailing Address 995 Market Street

City San Francisco State CA Zip Code 94103

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
08 / 22 / 2016

FEC Identification Number

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

Memo Item

Full Name (Last, First, Middle Initial)

B. Piryx Inc.

Mailing Address 995 Market Street

City San Francisco State CA Zip Code 94103

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
08 / 24 / 2016

FEC Identification Number

Transaction ID : SB.7
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Capitol Computer Exchange

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement
Computer services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
08 / 29 / 2016

FEC Identification Number

Transaction ID : SB.48
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. Red Elephant Strategy LLC

Mailing Address 2205 Main Line Blvd

City
Alexandria

State
VA

Zip Code
22301

Purpose of Disbursement
Strategy consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2016

FEC Identification Number

C []

Transaction ID : SB.21

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Capitol Strategy Group

Mailing Address 2700 Cumberland Pkwy Suite 150

City
Atlanta

State
GA

Zip Code
30339

Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2016

FEC Identification Number

C []

Transaction ID : SB.8

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LPC 25 LLC

Mailing Address 120 Newport Center Dr.

City
Newport Beach

State
CA

Zip Code
92660

Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2016

FEC Identification Number

C []

Transaction ID : SB.9

Amount of Each Disbursement this Period

150000.00

Memo Item

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

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

156500.00

[]

**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. PCI Payment Solutions		Date of Disbursement MM / DD / YYYY 09 / 02 / 2016	
Mailing Address 902 Chinquapin		FEC Identification Number C [REDACTED]	
City McLean	State VA	Zip Code 22102	Transaction ID : SB.10
Purpose of Disbursement Merchant fee		Category/ Type 003	Amount of Each Disbursement this Period 45.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. First National Bank		Date of Disbursement MM / DD / YYYY 09 / 04 / 2016	
Mailing Address P.O. Box 2557		FEC Identification Number C [REDACTED]	
City Omaha	State NE	Zip Code 68103	Transaction ID : SB.90
Purpose of Disbursement Credit card-see memo entries		Category/ Type 002	Amount of Each Disbursement this Period 6137.16
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement MM / DD / YYYY 09 / 04 / 2016	
Mailing Address 3875 Airways		FEC Identification Number C [REDACTED]	
City Memphis	State TN	Zip Code 38116	Transaction ID : SB.92
Purpose of Disbursement Printing and shipping		Category/ Type 001	Amount of Each Disbursement this Period 1114.01
Candidate Name		<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	6182.16
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. Four Seasons Resort

Full Name (Last, First, Middle Initial)

Mailing Address 1165 Leslie Street

City Toronto, Ontario M3C 2K8 State Zip Code

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB.94

Amount of Each Disbursement this Period: 3568.51

Memo Item

B. Go Daddy.com

Full Name (Last, First, Middle Initial)

Mailing Address 14455 N. Hayden Rd. #219

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement Web domain

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB.91

Amount of Each Disbursement this Period: 163.18

Memo Item

C. Microsoft

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Computer services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 04 / 2016

FEC Identification Number: C

Transaction ID : SB.95

Amount of Each Disbursement this Period: 106.29

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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. Pantheon

Mailing Address 717 California Street

City San Francisco State CA Zip Code 94108

Purpose of Disbursement Website development

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB.96

Amount of Each Disbursement this Period

[REDACTED] 105.75

Memo Item

Full Name (Last, First, Middle Initial)

B. Savoya

Mailing Address 1845 Woodall Rogers Freeway
17th Floor

City Dallas State TX Zip Code 75201

Purpose of Disbursement Ground transportation

002

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB.93

Amount of Each Disbursement this Period

[REDACTED] 974.60

Memo Item

Full Name (Last, First, Middle Initial)

C. Anne Schroeder Mullins & Co.

Mailing Address 4436 Yuma Street, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Communications consulting

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB.23

Amount of Each Disbursement this Period

[REDACTED] 3000.00

Memo Item

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

[REDACTED] 3000.00

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. E.C. Maruggi Incorporated

Mailing Address 660 South Howell St.

City
St. Paul

State
MN

Zip Code
55116

Purpose of Disbursement
Business consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C

Transaction ID : SB.22

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. 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

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C

Transaction ID : SB.50

Amount of Each Disbursement this Period

24800.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 Spring Hill Road, Suite 400

City
Tysons Corner

State
VA

Zip Code
22182

Purpose of Disbursement
Merchant fee

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2016

FEC Identification Number

C

Transaction ID : SB.11

Amount of Each Disbursement this Period

1.28

Memo Item

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

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

25801.28

**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. Conston Communications

Full Name (Last, First, Middle Initial)
Mailing Address 1758 U St. NW, Unit 3

City Washington State DC Zip Code 20009

Purpose of Disbursement Strategy consulting
Candidate Name

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

Date of Disbursement: MM / DD / YYYY
09 / 07 / 2016

FEC Identification Number: C
Transaction ID : SB.24
Amount of Each Disbursement this Period: 15000.00

Memo Item

B. The Tarrance Group

Full Name (Last, First, Middle Initial)
Mailing Address 201 N. Union St, Suite 410

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: MM / DD / YYYY
09 / 07 / 2016

FEC Identification Number: C
Transaction ID : SB.51
Amount of Each Disbursement this Period: 24441.00

Memo Item

C. 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
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number: C
Transaction ID : SB.52
Amount of Each Disbursement this Period: 16740.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 56181.00

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
Donor database subscription

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.29

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Trinity Financial Reporting & Compliance

Mailing Address P.O. Box 710993

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Accounting and compliance

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.35

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. SSS Holdings, LLC

Mailing Address 231 W. Michigan St. P244

City Milwaukee State WI Zip Code 53203

Purpose of Disbursement
Fundraising event - venue

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

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. Tanner, Jenny, , ,

Mailing Address 1747 Pennsylvania Ave. NW
5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement
Travel - see memo entries

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.97
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 3875 Airways

City Memphis State TN Zip Code 38116

Purpose of Disbursement
Printing and shipping

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.100
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Snake River Lodge

Mailing Address 7710 Granite Loop Road

City Teton Village State WY Zip Code 83025

Purpose of Disbursement
Lodging

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.98
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. United Airlines

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement Airfare

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number
C
Transaction ID : SB.99
Amount of Each Disbursement this Period
876.20

Memo Item

Full Name (Last, First, Middle Initial)

B. DT Client Services LLC

Mailing Address 1101 14th Street NW Suite 650

City Washington State DC Zip Code 20005

Purpose of Disbursement Media Optimization

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number
C
Transaction ID : SB.37
Amount of Each Disbursement this Period
449500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DT Client Services LLC

Mailing Address 1101 14th Street NW Suite 650

City Washington State DC Zip Code 20005

Purpose of Disbursement Media Optimization

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 15 / 2016

FEC Identification Number
C
Transaction ID : SB.38
Amount of Each Disbursement this Period
46487.24

Memo Item

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

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

495987.24

**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 09 / 16 / 2016	
Mailing Address 1100 H Street, NW Suite 1100		FEC Identification Number C [REDACTED] Transaction ID : SB.39 Amount of Each Disbursement this Period 50000.00	
City Washington	State DC	Zip Code 20005	Category/ Type 001
Purpose of Disbursement Media Optimization			
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. The Tarrance Group		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016	
Mailing Address 201 N. Union St, Suite 410		FEC Identification Number C [REDACTED] Transaction ID : SB.53 Amount of Each Disbursement this Period 22017.00	
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. The Tarrance Group		Date of Disbursement MM / DD / YYYY 09 / 19 / 2016	
Mailing Address 201 N. Union St, Suite 410		FEC Identification Number C [REDACTED] Transaction ID : SB.54 Amount of Each Disbursement this Period 25235.00	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	97252.00
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
09 / 20 / 2016

FEC Identification Number

Transaction ID : SB.12
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. DT Client Services LLC

Mailing Address 1101 14th Street NW Suite 650

City Washington State DC Zip Code 20005

Purpose of Disbursement
Media Optimization

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number

Transaction ID : SB.40
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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number

Transaction ID : SB.65
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 09 / 21 / 2016		
Mailing Address 413 Pitt Street			FEC Identification Number C [REDACTED] Transaction ID : SB.68 Amount of Each Disbursement this Period 23000.00		
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) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) B. Meeting Street Research, LLC			Date of Disbursement MM / DD / YYYY 09 / 21 / 2016		
Mailing Address 413 Pitt Street			FEC Identification Number C [REDACTED] Transaction ID : SB.69 Amount of Each Disbursement this Period 23000.00		
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) ▼				
State: District:	<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) C. Newton Heath LLC			Date of Disbursement MM / DD / YYYY 09 / 21 / 2016		
Mailing Address P.O. Box 581			FEC Identification Number C [REDACTED] Transaction ID : SB.62 Amount of Each Disbursement this Period 22898.00		
City Alexandria	State VA	Zip Code 22313	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) ▼				
State: District:	<input type="checkbox"/> Memo Item				

SUBTOTAL of Disbursements This Page (optional).....▶	68898.00
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. NMB Research LLC		Date of Disbursement MM / DD / YYYY 09 / 21 / 2016
Mailing Address 206 N. Fayette St.		FEC Identification Number C [REDACTED] Transaction ID : SB.55 Amount of Each Disbursement this Period 108500.00
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. TargetPoint Consulting		Date of Disbursement MM / DD / YYYY 09 / 21 / 2016
Mailing Address 66 Canal Center Plaza Suite 555		FEC Identification Number C [REDACTED] Transaction ID : SB.56 Amount of Each Disbursement this Period 50000.00
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. Wiley Rein LLP		Date of Disbursement MM / DD / YYYY 09 / 21 / 2016
Mailing Address 1776 K Street NW		FEC Identification Number C [REDACTED] Transaction ID : SB.36 Amount of Each Disbursement this Period 25487.50
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Legal services		Category/Type 001
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).....▶	183987.50
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

005

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	6

FEC Identification Number

C

Transaction ID : SB.73

Amount of Each Disbursement this Period

22017.00

Memo Item

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

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	6

FEC Identification Number

C

Transaction ID : SB.74

Amount of Each Disbursement this Period

9000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Shields, Mike , , ,

Mailing Address 1747 Pennsylvania Ave. NW
5th Floor

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Travel - see memo entries

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	6

FEC Identification Number

C

Transaction ID : SB.101

Amount of Each Disbursement this Period

8795.05

Memo Item

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

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

39812.05

**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 Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Amon Carter Boulevard

City Ft. Worth State TX Zip Code 76155

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 23 / 2016

FEC Identification Number: C

Transaction ID : SB.106

Amount of Each Disbursement this Period: 353.10

Memo Item

B. Amtrak

Full Name (Last, First, Middle Initial)

Mailing Address 4300 Garden City Drive

City Washington State DC Zip Code 20005

Purpose of Disbursement Transportation

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 23 / 2016

FEC Identification Number: C

Transaction ID : SB.107

Amount of Each Disbursement this Period: 469.00

Memo Item

C. Delta Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 1030 Delta Boulevard

City Atlanta State GA Zip Code 30354

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 23 / 2016

FEC Identification Number: C

Transaction ID : SB.103

Amount of Each Disbursement this Period: 1158.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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. Dollar Rent A Car

Mailing Address 5330 E. 31st Street

City
Tulsa

State
OK

Zip Code
74135

Purpose of Disbursement
Ground transportation

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2016

FEC Identification Number

C

Transaction ID : SB.105

Amount of Each Disbursement this Period

1257.92

Memo Item

Full Name (Last, First, Middle Initial)

B. Four Seasons Resort

Mailing Address 1165 Leslie Street

City
Toronto, Ontario M32 CK8

State

Zip Code

Purpose of Disbursement
Lodging

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2016

FEC Identification Number

C

Transaction ID : SB.104

Amount of Each Disbursement this Period

3543.76

Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 233 S. Wacker Drive

City
Chicago

State
IL

Zip Code
60606

Purpose of Disbursement
Airfare

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2016

FEC Identification Number

C

Transaction ID : SB.102

Amount of Each Disbursement this Period

1892.20

Memo Item

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

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

0.00

**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

A. Capitol Computer Exchange

Full Name (Last, First, Middle Initial)

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement Computer services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 23 / 2016

FEC Identification Number C

Transaction ID : SB.49

Amount of Each Disbursement this Period 207.20

Memo Item

B. Deep Root Analytics LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Wilson Blvd. Suite 330

City Arlington State VA Zip Code 22209

Purpose of Disbursement Media Optimization

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 23 / 2016

FEC Identification Number C

Transaction ID : SB.41

Amount of Each Disbursement this Period 145000.00

Memo Item

C. LPC 25 LLC

Full Name (Last, First, Middle Initial)

Mailing Address 120 Newport Center Dr.

City Newport Beach State CA Zip Code 92660

Purpose of Disbursement Fundraising consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 23 / 2016

FEC Identification Number C

Transaction ID : SB.14

Amount of Each Disbursement this Period 33335.21

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 178542.41

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. 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : SB.114
Amount of Each Disbursement this Period
298500.00

Memo Item Pre-payment for future independent 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : SB.115
Amount of Each Disbursement this Period
301550.00

Memo Item Pre-payment for future independent 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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C
Transaction ID : SB.116
Amount of Each Disbursement this Period
302600.00

Memo Item Pre-payment for future independent 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. CMDI

Mailing Address 1593 Spring Hill Road, Suite 400

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	7		2	0	1	6		

City Tysons Corner

State VA

Zip Code 22182

FEC Identification Number

C

Transaction ID : SB.13

Amount of Each Disbursement this Period

27.30

Memo Item

Purpose of Disbursement Merchant fee

003

Category/Type

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. Cold Spark Media

Mailing Address 307 Fourth Ave. Suite 920

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	7		2	0	1	6		

City Pittsburgh

State PA

Zip Code 15222

FEC Identification Number

C

Transaction ID : SB.117

Amount of Each Disbursement this Period

17977.56

Pre-payment for future independent expenditure

Memo Item

Purpose of Disbursement Direct mail

004

Category/Type

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. Red Elephant Strategy LLC

Mailing Address 2205 Main Line Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	7		2	0	1	6		

City Alexandria

State VA

Zip Code 22301

FEC Identification Number

C

Transaction ID : SB.25

Amount of Each Disbursement this Period

6000.00

Memo Item

Purpose of Disbursement Strategy consulting

001

Category/Type

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)..... ▶

24004.86

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial) A. Edwards, Trent, , ,		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB.108 Amount of Each Disbursement this Period [REDACTED] 7585.00	
City Washington	State DC	Zip Code 20006	Category/ Type 002
Purpose of Disbursement Travel - see memo entries			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C [REDACTED] Transaction ID : SB.109 Amount of Each Disbursement this Period [REDACTED] 789.20	
City Ft. Worth	State TX	Zip Code 76155	Category/ Type 002
Purpose of Disbursement Airfare			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 1030 Delta Boulevard		FEC Identification Number C [REDACTED] Transaction ID : SB.111 Amount of Each Disbursement this Period [REDACTED] 663.20	
City Atlanta	State GA	Zip Code 30354	Category/ Type 002
Purpose of Disbursement Airfare			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 7585.00
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

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. Hotel Terra

Mailing Address 3335 West Village Drive

City Teton Village State WY Zip Code 83025

Purpose of Disbursement Lodging

002
Category/Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
09 / 28 / 2016

FEC Identification Number
C
Transaction ID : SB.110
Amount of Each Disbursement this Period
948.02

Memo Item

Full Name (Last, First, Middle Initial)

B. Morton's

Mailing Address 1510 W. Loop South

City Houston State TX Zip Code 77027

Purpose of Disbursement Travel meals

002
Category/Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
09 / 28 / 2016

FEC Identification Number
C
Transaction ID : SB.112
Amount of Each Disbursement this Period
3981.77

Memo Item

Full Name (Last, First, Middle Initial)

C. Nemaocolin Woodlands Resort

Mailing Address 1001 Lafayette Drive

City Farmington State PA Zip Code 15437

Purpose of Disbursement Lodging

002
Category/Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
09 / 28 / 2016

FEC Identification Number
C
Transaction ID : SB.113
Amount of Each Disbursement this Period
450.52

Memo Item

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

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

0.00

**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

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. NMB Research LLC		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 206 N. Fayette St.		FEC Identification Number C [REDACTED] Transaction ID : SB.81 Amount of Each Disbursement this Period 29500.00	
City Alexandria	State VA	Zip Code 22314	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. North Star Opinion Research, Inc.		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 112 North Alfred Street		FEC Identification Number C [REDACTED] Transaction ID : SB.77 Amount of Each Disbursement this Period 13750.00	
City Alexandria	State VA	Zip Code 22314	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. Public Opinion Strategies LLC		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 214 N. Fayette Street		FEC Identification Number C [REDACTED] Transaction ID : SB.78 Amount of Each Disbursement this Period 25500.00	
City Alexandria	State VA	Zip Code 22314	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:			

SUBTOTAL of Disbursements This Page (optional).....▶	68750.00
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

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. The Tarrance Group		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016
Mailing Address 201 N. Union St, Suite 410		FEC Identification Number C [REDACTED] Transaction ID : SB.79 Amount of Each Disbursement this Period 15184.00
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. The Tarrance Group		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016
Mailing Address 201 N. Union St, Suite 410		FEC Identification Number C [REDACTED] Transaction ID : SB.80 Amount of Each Disbursement this Period 17388.00
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. American Action Network		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB.119 Amount of Each Disbursement this Period 192792.00
City Washington	State DC	Zip Code 20006
Purpose of Disbursement In kind-payroll/office space/research	Category/Type 001	
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).....▶	225364.00
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

A. Push Digital

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 7431

City Columbia State SC Zip Code 29202

Purpose of Disbursement Media placement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB.118

Amount of Each Disbursement this Period: 83563.00

Memo Item Pre-payment for future independent expenditure

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).....▶	83563.00
TOTAL This Period (last page this line number only).....▶	2791225.99

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

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. Americans United for Values

Mailing Address P.O. Box 90891

City
Washington

State
DC

Zip Code
20090

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	6

FEC Identification Number

C 00604496

Transaction ID : SB.26

Amount of Each Disbursement this Period

85000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

85000.00

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

85000.00

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: Teachout, Zephyr, ,
Office Sought: House, District: 19, State: NY
Amount: 40618.00
Transaction ID: SB.120
Date of Disbursement or Obligation: 09/09/2016
Disbursement For: General 2016

Full Name of Payee: Something Else Strategies
Mailing Address: 212 Golden Willow Court
City: Easley, State: SC, Zip Code: 29642
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, ,
Office Sought: House, District: 19, State: NY
Amount: 19000.00
Transaction ID: SB.121
Date of Disbursement or Obligation: 09/12/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 59618.00
(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 / 15 / 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: 09/14/2016
Amount: 236000.00
Transaction ID: SB.122
Date of Disbursement or Obligation: 09/09/2016
Name of Federal Candidate: Teachout, Zephyr, ,
Office Sought: House District: 19 State: NY
Disbursement For: General 2016

Full Name of Payee: Cold Spark Media
Mailing Address: 307 Fourth Ave. Suite 920
City: Pittsburgh State: PA Zip Code: 15222
Purpose of Expenditure: Direct mail
Category/Type: 004
Date of Public Distribution/Dissemination: 09/15/2016
Amount: 18816.84
Transaction ID: SB.123
Date of Disbursement or Obligation: 09/09/2016
Name of Federal Candidate: Teachout, Zephyr, ,
Office Sought: House District: 19 State: NY
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 254816.84
(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 / 15 / 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
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House District: 19 State: NY
Amount: 381078.00
Transaction ID: SB.124
Date of Disbursement or Obligation: 09/16/2016
Disbursement For: General 2016

Full Name of Payee: Cold Spark Media
Mailing Address: 307 Fourth Ave. Suite 920
City: Pittsburgh State: PA Zip Code: 15222
Purpose of Expenditure: Direct mail Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House District: 19 State: NY
Amount: 20078.42
Transaction ID: SB.125
Date of Disbursement or Obligation: 09/15/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 401156.42
(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 / 15 / 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 Cold Spark Media		Date of Public Distribution/Dissemination 09 / 24 / 2016	
Mailing Address 307 Fourth Ave. Suite 920		Amount 11198.71	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : SB.126
Purpose of Expenditure Direct mail		Category/Type 004	Date of Disbursement or Obligation 09 / 21 / 2016
Name of Federal Candidate: Teachout, Zephyr, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 726789.97		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 Cold Spark Media		Date of Public Distribution/Dissemination 09 / 27 / 2016	
Mailing Address 307 Fourth Ave. Suite 920		Amount 17333.68	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : SB.127
Purpose of Expenditure Direct mail		Category/Type 004	Date of Disbursement or Obligation 09 / 21 / 2016
Name of Federal Candidate: Teachout, Zephyr, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 744123.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	28532.39
(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 / 15 / 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
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House District: 19 State: NY
Calendar Year-To-Date Per Election for Office Sought: 1125201.65
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, , ,
Office Sought: House District: 19 State: NY
Calendar Year-To-Date Per Election for Office Sought: 1145510.65
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 401387.00
(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 / 15 / 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 Arena Online
Mailing Address 1780 West Sequoia Vista Circle
City Salt Lake City State NY Zip Code 84104
Purpose of Expenditure Media placement and production
Category/Type 004
Name of Federal Candidate: Throne-Holst, Anna, ,
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 363.33
Disbursement For: General 2016

Full Name of Payee Arena Online
Mailing Address 1780 West Sequoia Vista Circle
City Salt Lake City State NY Zip Code 84104
Purpose of Expenditure Media placement and production
Category/Type 004
Name of Federal Candidate: Deacon, Colleen, ,
Office Sought: House District: 24 State: NY
Calendar Year-To-Date Per Election for Office Sought 363.33
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 726.66
(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 / 15 / 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 Arena Online	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 25 / 2016 </div>			
Mailing Address 1780 West Sequoia Vista Circle	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 363.33 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Salt Lake City</td> <td style="width:17%; padding: 2px;">State TX</td> <td style="width:50%; padding: 2px;">Zip Code 84104</td> </tr> </table>		City Salt Lake City	State TX	Zip Code 84104
City Salt Lake City		State TX	Zip Code 84104	
Purpose of Expenditure Media placement and production				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Gallego, Pete, , ,	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 <div style="border: 1px solid black; padding: 2px; text-align: right;"> 363.33 </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 Arena Online	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 25 / 2016 </div>			
Mailing Address 1780 West Sequoia Vista Circle	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 363.33 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Salt Lake City</td> <td style="width:17%; padding: 2px;">State CA</td> <td style="width:50%; padding: 2px;">Zip Code 84104</td> </tr> </table>		City Salt Lake City	State CA	Zip Code 84104
City Salt Lake City		State CA	Zip Code 84104	
Purpose of Expenditure Media placement and production				
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: <u>07</u> State: <u>CA</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 363.33 </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;"> 726.66 </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 / 15 / 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 Arena Online	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 25 / 2016 </div>						
Mailing Address 1780 West Sequoia Vista Circle	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 363.33 </div>						
<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;">Salt Lake City</td> <td style="padding: 2px;">NV</td> <td style="padding: 2px;">84104</td> </tr> </table>		City	State	Zip Code	Salt Lake City	NV	84104
City		State	Zip Code				
Salt Lake City	NV	84104					
Purpose of Expenditure Media placement and production	Category/Type 004						
Name of Federal Candidate: Rosen, Jacky, , ,	<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; text-align: right;"> M M / D D / Y Y Y Y Y Y 363.33 </div>						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate							
District: <u>03</u> State: <u>NV</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 Arena Online	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 25 / 2016 </div>						
Mailing Address 1780 West Sequoia Vista Circle	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 363.33 </div>						
<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;">Salt Lake City</td> <td style="padding: 2px;">VA</td> <td style="padding: 2px;">84104</td> </tr> </table>		City	State	Zip Code	Salt Lake City	VA	84104
City		State	Zip Code				
Salt Lake City	VA	84104					
Purpose of Expenditure Media placement and production	Category/Type 004						
Name of Federal Candidate: Bennett, Luanne, , ,	<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; text-align: right;"> M M / D D / Y Y Y Y Y Y 363.33 </div>						
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate							
District: <u>10</u> State: <u>VA</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; text-align: right;"> M M / D D / Y Y Y Y Y Y 726.66 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 000.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 726.66 </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 15 / 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 Arena Online	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016						
Mailing Address 1780 West Sequoia Vista Circle	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">363.33</div> Transaction ID : SB.136 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 30 / 2016						
<table border="1" 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>Salt Lake City</td> <td>PA</td> <td>84104</td> </tr> </table>		City	State	Zip Code	Salt Lake City	PA	84104
City		State	Zip Code				
Salt Lake City	PA	84104					
Purpose of Expenditure Media placement and production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Santarsiero, Steve, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: PA						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">363.33</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 Arena Online	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016						
Mailing Address 1780 West Sequoia Vista Circle	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">363.33</div> Transaction ID : SB.137 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 30 / 2016						
<table border="1" 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>Salt Lake City</td> <td>NY</td> <td>84104</td> </tr> </table>		City	State	Zip Code	Salt Lake City	NY	84104
City		State	Zip Code				
Salt Lake City	NY	84104					
Purpose of Expenditure Media placement and production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Myers, Kim, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 22 State: NY						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">363.33</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;">726.66</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

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10 / 15 / 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 Arena Online <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1780 West Sequoia Vista Circle	Amount <input type="text"/>
City Salt Lake City State NY Zip Code 84104	Transaction ID : SB.138 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Media placement and production Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Derrick, Mike, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 21 State: NY
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 Arena Online <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1780 West Sequoia Vista Circle	Amount <input type="text"/>
City Salt Lake City State NV Zip Code 84104	Transaction ID : SB.139 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Media placement and production Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Kihuen, Ruben, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 04 State: NV
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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/ /

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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: Arena Online
Mailing Address: 1780 West Sequoia Vista Circle
City: Salt Lake City, State: NE, Zip Code: 84104
Purpose of Expenditure: Media placement and production
Category/Type: 004
Name of Federal Candidate: Ashford, Brad, Support/Oppose
Office Sought: House, District: 02, State: NE
Disbursement For: General 2016
Amount: 363.34
Transaction ID: SB.140
Date of Disbursement or Obligation: 07/30/2016

Full Name of Payee: Arena Online
Mailing Address: 1780 West Sequoia Vista Circle
City: Salt Lake City, State: MI, Zip Code: 84104
Purpose of Expenditure: Media placement and production
Category/Type: 004
Name of Federal Candidate: Johnson, Lon, Support/Oppose
Office Sought: House, District: 01, State: MI
Disbursement For: General 2016
Amount: 363.34
Transaction ID: SB.141
Date of Disbursement or Obligation: 07/30/2016

(a) SUBTOTAL of Itemized Independent Expenditures: 726.68
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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Date

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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 Arena Online	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016						
Mailing Address 1780 West Sequoia Vista Circle	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">363.34</div> Transaction ID : SB.142 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 30 / 2016						
<table border="1" 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>Salt Lake City</td> <td>ME</td> <td>84104</td> </tr> </table>		City	State	Zip Code	Salt Lake City	ME	84104
City		State	Zip Code				
Salt Lake City	ME	84104					
Purpose of Expenditure Media placement and production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Cain, Emily, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: ME						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">363.34</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 Arena Online	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016						
Mailing Address 1780 West Sequoia Vista Circle	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">363.34</div> Transaction ID : SB.143 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 30 / 2016						
<table border="1" 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>Salt Lake City</td> <td>FL</td> <td>84104</td> </tr> </table>		City	State	Zip Code	Salt Lake City	FL	84104
City		State	Zip Code				
Salt Lake City	FL	84104					
Purpose of Expenditure Media placement and production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Garcia, Joe, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 26 State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">363.34</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;">726.68</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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**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 Arena Online <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1780 West Sequoia Vista Circle	Amount <input type="text"/>
City Salt Lake City State CO Zip Code 84104	Transaction ID : SB.144 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Media placement and production Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Carroll, Morgan, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: CO
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	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 <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address	Amount <input type="text"/>
City State Zip Code	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Category/Type <input type="text"/>	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 <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <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