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| PAGE | 1 | OF | 2 |
| FOR SE OF FORM 24/48 | | | |

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

Check if ☒ 24-hour report ☐ 48-hour report ➤
☒ New report ☐ Amends report filed on

M M

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D D

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Y Y Y Y

| | | | |
|---|--|--|---|
| Full Name of Payee Big Dog Strategies, LLC | | Date of Public Distribution/Dissemination <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 21 / 2022</div> </div> | |
| Mailing Address 23150 Fashion Dr. Suite 231 | | Amount <div> <div></div> <div>48709.86</div> </div> | |
| City Estero | State FL | Zip Code 33928 | Transaction ID : 001 |
| Purpose of Expenditure Direct Mail | Category/ Type | 004 | Date of Disbursement or Obligation <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>10 / 19 / 2022</div> </div> |
| Name of Federal Candidate Riley, Josh, , , | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate | District: 19 State: NY |
| Calendar Year-To-Date Per Election for Office Sought | <div> <div></div> <div>2994700.46</div> </div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ |

| | | | |
|---|-------------|---|---|
| Full Name of Payee Big Dog Strategies, LLC | | Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>10 / 21 / 2022</div> </div> | |
| Mailing Address 23150 Fashion Dr. Suite 231 | | Amount <div> <div>950.00</div> </div> | |
| City Estero | State FL | Zip Code 33928 | Transaction ID : 002 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>10 / 21 / 2022</div> </div> |
| Purpose of Expenditure Direct Mail | | Category/ Type 004 | |
| Name of Federal Candidate Molinaro, Marcus, , | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate |
| Calendar Year-To-Date Per Election for Office Sought <div> <div>2995650.46</div> </div> | | District: <u>19</u> State: <u>NY</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 49659.86 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) 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 _____

Signature

MM / DD / YYYY

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) Congressional Leadership Fund | | FEC IDENTIFICATION NUMBER ▼ C C00504530 |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY |

| | | |
|---|-----------------------|---|
| Full Name of Payee Big Dog Strategies, LLC | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2022 |
| Mailing Address 23150 Fashion Dr. Suite 231 | | Amount 950.00 |
| City Estero | State FL | Zip Code 33928 |
| Purpose of Expenditure Direct Mail | Category/ Type 004 | Transaction ID : 003 Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2022 |
| Name of Federal Candidate Riley, Josh, , , | | 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 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|-------------------|--|
| Full Name of Payee | | Date of Public Distribution/Dissemination MM / DD / YYYY |
| Mailing Address | | Amount |
| City | State | Zip Code |
| Purpose of Expenditure | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 950.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | |
| (c) TOTAL Independent Expenditures.....▶ | 50609.86 |

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

MM / DD / YYYY
10 / 22 / 2022

Signature