

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

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> 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 <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:100px; height:20px; text-align:center">Y Y Y Y Y Y Y Y Y Y</table>	

Full Name of Payee <b>Meridian Pacific</b>		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">21</table> / <table border="1" style="display:inline-table; width:100px; height:20px; text-align:center">2020</table>	
Mailing Address 925 University Ave		Amount <table border="1" style="display:inline-table; width:200px; height:20px; text-align:right">7813.84</table>	
City Sacramento	State CA	Zip Code 95825	Transaction ID : SE.001
Purpose of Expenditure Direct Mail	Category/ Type 004	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">13</table> / <table border="1" style="display:inline-table; width:100px; height:20px; text-align:center">2020</table>	
Name of Federal Candidate Cox, TJ, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Cavalry</b>		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">21</table> / <table border="1" style="display:inline-table; width:100px; height:20px; text-align:center">2020</table>	
Mailing Address 1634 Eye Street NW #800		Amount <table border="1" style="display:inline-table; width:200px; height:20px; text-align:right">48279.82</table>	
City Washington	State DC	Zip Code 20006	Transaction ID : SE.002
Purpose of Expenditure Media Placement	Category/ Type 004	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:50px; height:20px; text-align:center">16</table> / <table border="1" style="display:inline-table; width:100px; height:20px; text-align:center">2020</table>	
Name of Federal Candidate Cox, TJ, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:200px; height:20px; text-align:right">56093.66</table>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<table border="1" style="display:inline-table; width:200px; height:20px; text-align:center"></table>
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:200px; height:20px; text-align:center"></table>

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

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

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> 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 <b>FlexPoint Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2020
Mailing Address P.O. Box 1051		Amount 326063.00
City New Albany	State OH	Zip Code 43054
Purpose of Expenditure Media Placement	Category/ Type 004	Transaction ID : SE.003 Date of Disbursement or Obligation MM / DD / YYYY 10 / 16 / 2020
Name of Federal Candidate Cox, TJ, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RedPrint Strategy</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2020
Mailing Address 1050 Johnnie Dodds Blvd Unit 2414		Amount 13000.00
City Mount Pleasant	State SC	Zip Code 29465
Purpose of Expenditure Media Production	Category/ Type 004	Transaction ID : SE.004 Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2020
Name of Federal Candidate Cox, TJ, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	339063.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	395156.66

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 / 2020

Signature