24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if 24-hour report 48-hour report New report Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Arena	10 08 2020
Mailing Address 1260 Stringham Ave	10 06 2020
#350	Amount
City State Zip Code	20324.00
Salt Lake City UT 84106	Transaction ID : SE.001 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Category/ Type 004	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Off	fice Sought: X House District: 01
Hinson, Ashley, , ,	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Dis 202	sbursement For: Primary ☐ General Other (specify) ☐
Full Name of Payee	Date of Public Distribution/Dissemination
Arena	10 08 2020
Mailing Address 1260 Stringham Ave	Amount
#350	
City State Zip Code	18080.00
Salt Lake City UT 84106	Transaction ID : SE.002 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Category/ Type 004	10 05 / Y Y Y Y
Name of Federal Candidate Support Off	fice Sought: 🗶 House District:01
Finkenauer, Abby, , ,	President Senate State: IA
	sbursement For: Primary General 20 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	38404.00
(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	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report	
	Date of Public Distribution/Dissemination
FlexPoint Media	10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 1051	Amount
City State Zip Code	231250.00
	Transaction ID : SE.003 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	10 08 / 2020
Name of Federal Candidate Support Office S	Sought: X House District: 01
Finkenauer Abby	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disburs 2020	ement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	, , , , , , , , , , , , , , , , , , , ,
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office 5	Sought: House District:
Oppose F	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	sement For: Primary General Other (specify) ▶
	(4) 44 (4)
(a) SUBTOTAL of Itemized Independent Expenditures	231250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	269654.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Crosby, Caleb, , , [Electronically Filed] Date 10	10 / 2020
Oignatule	