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 rep	port Amends report f	iled on Man / Dab / Yaryay
Full Name of Payee THE HEREFORD AGENCY			Date of Public Distribution/Dissemination
Mailing Address 908 KING ST			10 24 2024
STE 100			Amount
City	State	Zip Code	3000.00
ALEXANDRIA	VA	22314	Transaction ID : SE24.1874  Date of Disbursement or Obligation
Purpose of Expenditure  MEDIA PRODUCTION		Category/ Type 004	10 24 7 2024
Name of Federal Candidate		Support O	ffice Sought: X House District: 01
PELTOLA, MARY, , ,		X Oppose	President Senate State: AK
Calendar Year-To-Date Per Election for Office Sought	7		isbursement For: Primary X General  224  Other (specify) ▶
Full Name of Payee CAVALRY LLC			Date of Public Distribution/Dissemination
Mailing Address 1634 EYE STREET NW			10 24 2024
#800			Amount
City	State	Zip Code	87000.00
WASHINGTON	DC	20006	Transaction ID : SE24.1908  Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT		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	office Sought: X House District: 06
ENGEL, KIRSTEN, , ,		Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7		isbursement For: ☐ Primary ☐ General 024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	9S		90000.00
(b) SUBTOTAL of Unitermized Independent Expendit	ures		
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorize	•	•
Crosby, Caleb, , ,		Date	10 25 2024
Signature			

oonedale Ly		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 rep	ort Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
SWING STRATEGIES		10 24 2024
Mailing Address 925 UNIVERSITY AVE		Amount
City State	Zip Code	17791.77
SACRAMENTO CA	95825	Transaction ID : SE24.1700  Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL	Category/ Type 004	10 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	ee Sought: X House District: 13
DUARTE, JOHN, , ,	Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	4318717.17 Disb 2024	oursement For: Primary
Full Name of Payee SWING STRATEGIES		Date of Public Distribution/Dissemination
Mailing Address 925 UNIVERSITY AVE		Amount 24 2024
City State	Zip Code	17791.76
SACRAMENTO CA	95825	Transaction ID : SE24.1699  Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL	Category/ Type 004	10 / 21 / 2024
Name of Federal Candidate	Support Office	ce Sought: X House District: 13
GRAY, ADAM, , ,		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		oursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		35583.53
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	<b>•</b>	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,		10 25 2024
Signature		

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ochedule L)							FOR SE OF	FORM 24/48
NAME OF COMMITTE						FEC I	IDENTIFICATI	ON NUMBER ▼
Congressional	Leadership Fund					С	C00504530	
Check if 24-hour	report 48-hour report	New rep	ort Am	nends repo	rt filed on	M = M	/ D D /	Y = Y = Y = Y
Full Name of Paye					Date	of Publ	lic Distribution	/Dissemination
PRIME MEDIA PAR						M M M	/ 24 /	2024
	201 WILSON BLVD.				Amo	ount		
City	<del>!</del> 110-126	State	Zip Code					13000.00
ARLINGTON		VA	22203				ID: SE24.180 oursement or (	08
Purpose of Expen- MEDIA PRODUC			Category/ Type	004		M 10	/ 23	2024
Name of Federal	Candidate		·	Support	Office Sou	ght:	X House	District: 22
SALAS, RUDY, , ,				Oppose	Presi	٠ .	Senate	State: CA
Calendar Yea Per Election	r-To-Date for Office Sought		6138784.26		Disburseme 2024		Primary	General
Full Name of Paye	ee					e of Pub	lic Distribution	/Dissemination
						10	24	2024
Mailing Address	1390 CHAIN BRIDGE ROAD SUITE 54				Amo	ount		
City		State	Zip Code					2572.61
MCLEAN		VA	22101				ID: SE24.191 oursement or	
Purpose of Expen			Category/ Type	004		10	24	2024
Name of Federal	Candidate			Support	Office Sou	ght:	X House	District: 22
SALAS, RUDY, , ,			X	Oppose	Pres		Senate	State: CA
Calendar Yea Per Election	r-To-Date for Office Sought	7 7	6138784.26	3	Disburseme 2024		Primary	/   X General
(a) SUBTOTAL of	Itemized Independent Expenditure	es					7	15572.61
(b) SUBTOTAL of	Unitemized Independent Expendi	tures			· •			
(c) TOTAL Indeper	dent Expenditures				• [			
with, or at the requ	erjury I certify that the independencest or suggestion of, any candidaty political party committee or its	ate or authorized						
	o, Caleb, , ,		_	Date	10	25	202	24
Signature								

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OF

		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 filed on	M / D D / Y Y Y Y Y
Full Name of Payee	Date	of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC		10 24 2024
Mailing Address 1426 N. 3RD STREET	Amou	
SUITE 310		III.
City State Zip Co		18148.00
HARRISBURG PA 17102		action ID : SE24.1849 of Disbursement or Obligation
Purpose of Expenditure  DIRECT MAIL  Category	Tory/ 004	10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	X Support Office Sough	t: X House District: 03
HURD, JEFFREY, , ,	Oppose Preside	
Calendar Year-To-Date Per Election for Office Sought 20828	Disbursemen 2024	
Full Name of Payer		ther (specify) ►
Full Name of Payee  THE POLITICAL FIRM	Date	of Public Distribution/Dissemination
Mailing Address 5555 HILTON AVE		10 24 2024
SUITE 203	Amou	int
City State Zip Co	de	26588.06
BATON ROUGE LA 70808		oction ID : SE24.1818 of Disbursement or Obligation
Purpose of Expenditure Categ	ory/ 004	10 23 2024
DIRECT MAIL	Гуре	10 23 2024
Name of Federal Candidate	Support Office Sough	nt: X House District: 08
CARAVEO, YADIRA, , ,	X Oppose Presid	ent Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 551192	Disbursemer 2024	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures		44736.06
(b) SUBTOTAL of Unitemized Independent Expenditures		7 1 7 1 7
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures reporte with, or at the request or suggestion of, any candidate or authorized commit party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date 10	25 2024
Signature		

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	saale L)			FOR SE OF FORM 24/48
	OF COMMITTEE (In Full)		FEC I	DENTIFICATION NUMBER ▼
Co	ngressional Leadership Fund		C	C00504530
Check	c if $X$ 24-hour report 48-hour report $X$ New rep	oort Amends report	iled on	/ D = D / Y = Y = Y
	ull Name of Payee		Date of Publ	ic Distribution/Dissemination
L	CAVALRY LLC		10 10	24 2024
M	ailing Address 1634 EYE STREET NW		Amount	
	#800 ity State	Zip Code		25000.00
	VASHINGTON DC	20006		ID : SE24.1913 bursement or Obligation
	urpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	Date of Disp	/ 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N	ame of Federal Candidate	Support C	office Sought:	X House District: 07
	BARRETT, THOMAS, M, ,	Oppose	President	Senate State: MI
	Calendar Year-To-Date Per Election for Office Sought		isbursement For: 024 Other (s	Primary
	ull Name of Payee		Date of Pub	lic Distribution/Dissemination
	lailing Address 16192 COASTAL HIGHWAY		10	24 2024
	alling Address 16192 COASTAL HIGHWAY		Amount	
С	ity State	Zip Code		24961.27
	LEWES DE	19958		D: SE24.1825 oursement or Obligation
	urpose of Expenditure DIRECT MAIL	Category/ Type 004	10	23 / 2024
N	ame of Federal Candidate	Support C	Office Sought:	House District: 07
	HERTEL, CURTIS, , ,			Senate State: MI
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 024 Other (s	Primary
(a)	SUBTOTAL of Itemized Independent Expenditures			49961.27
		ĺ		
(b)	SUBTOTAL of Unitemized Independent Expenditures		·	7
(c)	TOTAL Independent Expenditures	·······)		49-11-49-1
witl	der penalty of perjury I certify that the independent expenditures h, or at the request or suggestion of, any candidate or authorized ty committee) any political party committee or its agent.			
	Crosby, Caleb, , ,	Date	10 / 25	2024
	Signature			

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OF

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if X 24-hour report 48-hour report New report Amends report f	led on M / D D / Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
CHECKMATE STRATEGIES	10 24 2024
Mailing Address 12 BROAD ST	Amount
STE 303A	
City State Zip Code  RED BANK NJ 07701	17349.90  Transaction ID : SE24.1912  Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL  Category/ Type  004	10 24 / Y Y Y Y Y Y
Name of Federal Candidate Support O	ffice Sought: X House District:08
MCDONALD RIVET, KRISTEN, , , Oppose	President Senate State: MI
	sbursement For: Primary X General 24 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC	10 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N. 3RD STREET	Amount
SUITE 310  City State Zip Code	26222.00
HARRISBURG PA 17102	Transaction ID: SE24.1697
Purpose of Expenditure  Category/ 004	Date of Disbursement or Obligation
DIRECT MAIL Type 004	10 21 2024
	ffice Sought:
JAMES, JOHN, , ,	President Senate State: MI
	isbursement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	43571.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eigenty committee) any political party committee or its agent.	
Crosby, Caleb, , , Date	10 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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	icuaic Ly	FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Co	ongressional Leadership Fund	C C00504530
Che	ck if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Т	Full Name of Payee	Date of Public Distribution/Dissemination
	P2P MESSAGING	10 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54	Amount
-	City State Zip Code	1230.65
	MCLEAN VA 22101	Transaction ID : SE24.1915 Date of Disbursement or Obligation
	Purpose of Expenditure TEXT MESSAGES  Category/ Type 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Support Office	Sought: X House District: 02
	BACON, DONALD, J, , Oppose	President Senate State: NE
	Calendar Year-To-Date Per Election for Office Sought  Disbut 2024	rrsement For: Primary General
ŀ	Full Name of Pavee	Other (specify)   Data of Rublia Distribution/Discomination
	Full Name of Payee CHECKMATE STRATEGIES	Date of Public Distribution/Dissemination  10 24 2024
-	Mailing Address 12 BROAD ST	Amount 24 2024
	STE 303A	
	City State Zip Code	25572.60
	RED BANK NJ 07701	Transaction ID : SE24.1899  Date of Disbursement or Obligation
	Purpose of Expenditure  DIRECT MAIL  Category/ Type  004	10 24 2024
-	Name of Federal Candidate Support Office	e Sought: X House District: 19
	DILEY TOOL	President Senate State: NY
	Calendar Year-To-Date Per Election for Office Sought  Disbut 2024	ursement For: Primary ⊠ General  Other (specify) ▶
		Other (specily) F
(8	a) SUBTOTAL of Itemized Independent Expenditures	26803.25
(I	b) SUBTOTAL of Unitemized Independent Expenditures	
(0	c) TOTAL Independent Expenditures	
W	Inder penalty of perjury I certify that the independent expenditures reported herein were not may rith, or at the request or suggestion of, any candidate or authorized committee or agent of either arty committee) any political party committee or its agent.	
	Crosby, Caleb, , ,	0 25 2024
	Signature	

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OF

		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 filed	I on Man / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
HONOLD COMMUNICATIONS, INC.		10 24 2024
Mailing Address 32 WEST LAKE STREET		Amount
City State	Zip Code	13000.00
SHANEATELES NY	13152	Transaction ID : SE24.1903 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type 004	10 24 2024
Name of Federal Candidate	Support Office	e Sought: X House District: 09
KAPTUR, MARCY, , ,	X Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	3815128.97 Disb	ursement For: Primary X General  Other (specify) ▶
Full Name of Payer	,	
Full Name of Payee P2P MESSAGING		Date of Public Distribution/Dissemination  10 24 2024
Mailing Address 1390 CHAIN BRIDGE ROAD		
SUITE 54		Amount
City State	Zip Code	2782.73
MCLEAN VA	22101	Transaction ID : SE24.1917 Date of Disbursement or Obligation
Purpose of Expenditure TEXT MESSAGES	Category/ Type 004	10 24 2024
Name of Federal Candidate	Support Offic	e Sought: X House District: 09
KAPTUR, MARCY, , ,	∑ Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	3815128.97 Disb 2024	ursement For:  Primary  General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·····	15782.73
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	10 25 2024
Signature		

PAGE

OF

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	KI LIVE	TOTILO				PAGE 9 FOR SE OF	OF 11 FORM 24/48
NAME OF COMMITTEE (In Full)					FEC IDI	ENTIFICATION	N NUMBER ▼
Congressional Leadership Fund					C	00504530	
Check if 24-hour report 48-hour report	New rep	ort Amen	ıds repor	t filed on	- M /	D   D /	Y = Y = Y
Full Name of Payee				Date o	f Public	Distribution/	Dissemination
CHECKMATE STRATEGIES					10 /	24	2024
Mailing Address 12 BROAD ST STE 303A				Amour	nt		
		Zin Codo					20526.27
City State RED BANK NJ		Zip Code 07701				<b>D: SE24.192</b> sement or C	
Purpose of Expenditure		Category/			M /	D D /	YYYYY
DIRECT MAIL		Type	004		10	25	2024
Name of Federal Candidate		Sup	pport	Office Sought	: X	House	District:09
KAPTUR, MARCY, , ,		X Op	pose	Preside		Senate	State: OH
Calendar Year-To-Date Per Election for Office Sought		3815128.97		Disbursement 2024 Ot	For:	Primary ecify) ►	General
Full Name of Payee				Date of	of Public	Distribution/	Dissemination
CREATIVE DIRECT				M	10 /	24	2024
Mailing Address PO BOX 6654				Amou	nt		
City State	te	Zip Code		- [			39324.00
RICHMOND VA		23230				: <b>SE24.190</b> 4 rsement or C	
Purpose of Expenditure DIRECT MAIL		Category/ Type	004		10 /	24	2024
Name of Federal Candidate			. 1	0.00		<u> </u>	District: 13
SYKES, EMILIA, , ,			pport	Office Sough Preside	_	House Senate	State: OH
Calendar Year-To-Date Per Election for Office Sought		3305022.20		Disbursement 2024	t For: ther (spe	Primary	X General
					/-12	-,,	
(a) SUBTOTAL of Itemized Independent Expenditures				•			78850.37
(b) SUBTOTAL of Unitemized Independent Expenditures				· [.		1 1 7	
(a) TOTAL ladace deat 5 months							
(c) TOTAL Independent Expenditures				<b>-</b>	7	- 4	
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent.	authorized						
Crosby, Caleb, , ,		_	Date	10	25	202	4
Signature							

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NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if Z 24-hour report 48-hour report New report Amends report filed o	on M = M / D = D / Y = Y = Y
	Date of Public Distribution/Dissemination
BIG DOG STRATEGIES, LLC	10 24 2024
	Amount
STE 231	44020 44
	44020.41  Transaction ID : SE24.1548  Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL  Category/ Type  004	10 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office S	Sought: X House District: 07
WILD SUSAN	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought  Disburs 2024	sement For: Primary General
The second secon	Other (specify) -
Full Name of Payee P2P MESSAGING	Date of Public Distribution/Dissemination
Mailing Address 1390 CHAIN BRIDGE ROAD	10 24 2024
SUITE 54	Amount
City State Zip Code	3489.59
	ransaction ID : SE24.1918 Date of Disbursement or Obligation
Purpose of Expenditure TEXT MESSAGES  Category/ Type 004	10 / 24 / 2024
Name of Federal Candidate Support Office S	Sought: X House District: 07
WILD, SUSAN, , ,	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought  Disburs 2024	sement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	47510.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Crosby, Caleb, , , Date	M / D D / Y Y Y Y Y Y Z Y Z 2024
Signature	

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OF

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	THE OF INDEFERE	ENT EXILID	TTOTIES		PAGE 11 OF 11 FOR SE OF FORM 24/48
NAME OF COMMITTEE	(In Full)				FEC IDENTIFICATION NUMBER ▼
Congressional Le	eadership Fund				C C00504530
Check if X 24-hour rep	ort 48-hour report	New rep	ort Amends rep	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee				Date	of Public Distribution/Dissemination
SOMETHING ELSE STR	· 				M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 212	GOLDEN WILLOW COUR	Т		Amo	unt
City		State	Zip Code		6500.00
EASLEY		SC	29642		saction ID : SE24.1919 of Disbursement or Obligation
Purpose of Expenditu	re		Category/		M M / D D / Y Y Y Y
MEDIA PRODUCTIO			Type 004		10 24 2024
Name of Federal Can	ididate		Support	Office Sou	ght: X House District: 07
WILD, SUSAN, , ,			X Oppose	Presi	
Calendar Year-To Per Election for		7	7260040.00	Disburseme 2024	ent For:
Full Name of Payee				Date	e of Public Distribution/Dissemination
					M M / D D / Y Y Y Y
Mailing Address				Amo	punt
City		State	Zip Code		
				Dot	of Dishurament or Obligation
Purpose of Expenditu	ire		Category/ Type		e of Disbursement or Obligation
Name of Federal Car	ndidate		Support	Office Sou	aht: House District:
			Oppose	Pres	
Calendar Year-To				Disburseme	ent For: Primary General
Per Election for	Office Sought				Other (specify)
(a) SUBTOTAL of Iten	nized Independent Expend	litures			6500.00
(,,					7 7 7
(b) SUBTOTAL of Uni	temized Independent Expe	enditures		<b>&gt;</b>	4 4
(c) TOTAL Independer	nt Expenditures			··· <b>\</b>	454871.72
with, or at the request		didate or authorized			cooperation, consultation, or concert f the reporting entity is not a political
Crosby, Co	aleb, , ,		Date	e 10	25 / 2024
-					