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

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if 24-hour report	t filed on 09 / 19 / 2018
Full Name of Payee	Date of Public Distribution/Dissemination
Creative Direct	M = M / D = D / Y = Y = Y
Mailing Address 25 E. Main St.	09 17 2018 Amount
City State Zip Code	3723.75
Richmond VA 23219	Transaction ID: 001  Date of Disbursement or Obligation
Purpose of Expenditure Doorhangers  Category/ Type 004	09 / 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:  House District: 25
Hill, Katie, , ,	President Senate State: CA
Galchad Icar to Date	Disbursement For: Primary    General  Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Creative Direct	09 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 25 E. Main St.	09 17 2010
	Amount
City State Zip Code	3723.75
Richmond VA 23219	Transaction ID: 002  Date of Disbursement or Obligation
Purpose of Expenditure Doorhangers  Category/ Type 004	09 17 2018
Name of Foderal Condidate	25
X Support	Office Sought: House District: 25  President Senate State: CA
Knight, Steve, , , Oppose	Fresiderit Seriale State.
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary Seneral 2018 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	7447.50
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>&gt;</b>
(c) TOTAL Independent Expenditures	7447.50
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	09 20 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
Signature	