

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Congressional Leadership Fund

ADDRESS (number and street)

1747 Pennsylvania Avenue, NW

5th Floor

☐ Check if different than previously reported. (ACC)

Washington

DC

20006

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00504530

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☒

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

NC

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Crosby, Caleb, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Crosby, Caleb, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Congressional Leadership Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
08 / 22 / 2019 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2019</span>		<span style="border: 1px solid black; padding: 2px;">590831.52</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">7716089.42</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">2003482.00</span>	<span style="border: 1px solid black; padding: 2px;">11480927.42</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">9719571.42</span>	<span style="border: 1px solid black; padding: 2px;">12071758.94</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">1820517.53</span>	<span style="border: 1px solid black; padding: 2px;">4172705.05</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">7899053.89</span>	<span style="border: 1px solid black; padding: 2px;">7899053.89</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">1088998.70</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Congressional Leadership Fund**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
08	/	22	/	2019

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2019

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2003407.00	10722749.00
(ii) Unitemized .....	75.00	632.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2003482.00	10723381.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	40000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2003482.00	10763381.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	717545.92
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2003482.00	11480927.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2003482.00	11480927.42

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	315713.53	1491899.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	315713.53	1491899.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	1504804.00	2530655.67
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	150150.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	150150.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1820517.53	4172705.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1820517.53	4172705.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2003482.00	10763381.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	150150.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2003482.00	10613231.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	315713.53	1491899.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	717545.92
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	315713.53	774353.46

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 45

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BEREN, ADAM, , ,**

Mailing Address 1739 N. DUCKCROSS CV

City  
WICHITA

State  
KS

Zip Code  
67206-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BEREXCO, LLC

Occupation (for Individual)  
CHAIRMAN & PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 26 / 2019

**Transaction ID : SA11A.6112**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALERO SERVICES INC.**

Mailing Address ONE VALERO WAY

City  
SAN ANTONIO

State  
TX

Zip Code  
78249-1616

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 30 / 2019

**Transaction ID : SA11A.6118**

Amount of Each Receipt this Period

250000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WARREN A STEPHENS TRUST**

Mailing Address 111 CENTER STREET

City  
LITTLE ROCK

State  
AR

Zip Code  
72201-4402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2019

**Transaction ID : SA11A.6115**

Amount of Each Receipt this Period

500000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

760000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. ALTEP HOLDINGS CORP**

Mailing Address 730 FIFTH AVENUE  
20TH FLOOR

City  
NEW YORK

State  
NY

Zip Code  
10019-4105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 13 / 2019

**Transaction ID : SA11A.6116**

Amount of Each Receipt this Period

250000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. CHEVRON CORPORATION**

Mailing Address P.O. BOX 6042

City

SAN RAMON

State

CA

Zip Code

94583-0742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 19 / 2019

**Transaction ID : SA11A.6119**

Amount of Each Receipt this Period

500000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. WESCON MANAGEMENT GROUP, INC.**

Mailing Address PO BOX 908001

City

MIDLAND

State

TX

Zip Code

79708-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2019

**Transaction ID : SA11A.6120**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. COPELAND, GERRET, , , JR.**

Mailing Address PMB 361

242 S. WASHINGTON BLVD

City

SARASOTA

State

FL

Zip Code

34236-6943

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FLORIDA SUN REALTY

Occupation (for Individual)

MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2019

Transaction ID : SA11A.6122

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. RAI SERVICES COMPANY**

Mailing Address P.O. BOX 464

City

WINSTON SALEM

State

NC

Zip Code

27102-0464

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2019

Transaction ID : SA11A.6123

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AMERICAN ACTION NETWORK**

Mailing Address 1747 PENNSYLVANIA AVE. NW

5TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3696549.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11A.6129

Amount of Each Receipt this Period

53407.00

☐ Memo Item  
IN-KIND: RESEARCH & MEDIA ANALYTICS

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

168407.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. EMALEX BIOSCIENCES, INC.**

Mailing Address 1033 SKOKIE BLVD  
#600

City  
NORTHBROOK

State  
IL

Zip Code  
60062-4101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11A.6126

Amount of Each Receipt this Period

12500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. KOCH INDUSTRIES, INC.**

Mailing Address 4111 EAST 37TH ST NORTH

City  
WICHITA

State  
KS

Zip Code  
67220-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11A.6128

Amount of Each Receipt this Period

250000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. SKYLINE BIOSCIENCES, INC.**

Mailing Address 1033 SKOKIE BLVD  
#600

City  
NORTHBROOK

State  
IL

Zip Code  
60062-4101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11A.6125

Amount of Each Receipt this Period

12500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275000.00

2003407.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Majority Strategies, Inc.**Mailing Address 12854 Kenan Drive  
Suite 145City  
JacksonvilleState  
FLZip Code  
32258Purpose of Disbursement  
Independent expenditure previously reported as operating (See Schedule E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2019

FEC Identification Number

C

**Transaction ID : SB.45**

Amount of Each Disbursement this Period

- 9850.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TargetPoint Consulting**Mailing Address 66 Canal Center Plaza  
Suite 555City  
AlexandriaState  
VAZip Code  
22314Purpose of Disbursement  
Polling

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2019

FEC Identification Number

C

**Transaction ID : SB.25**

Amount of Each Disbursement this Period

45000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Computer Exchange**

Mailing Address 4487 Forbes Boulevard

City  
LanhamState  
MDZip Code  
20706Purpose of Disbursement  
Computer services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2019

FEC Identification Number

C

**Transaction ID : SB.15**

Amount of Each Disbursement this Period

21.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

35171.17

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2019

Mailing Address 1593 Spring Hill Road  
Suite 400City  
Tysons CornerState  
VAZip Code  
22182Purpose of Disbursement  
Donor database subscription

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.5

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FLS Connect, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2019

Mailing Address 7300 Hudson Blvd.  
Suite 270City  
St PaulState  
MNZip Code  
55128Purpose of Disbursement  
Conference call services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.16

Amount of Each Disbursement this Period

74.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Trinity Financial Reporting & Compliance**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2019

Mailing Address PO Box 710993

City  
HerndonState  
VAZip Code  
20171Purpose of Disbursement  
Accounting and compliance

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.9

Amount of Each Disbursement this Period

5302.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5876.89

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Furciniti, Ada, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2019

Mailing Address 1747 Pennsylvania Ave. NW  
5th FloorCity  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Travel - see memo entries

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.32

Amount of Each Disbursement this Period

1121.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Teton Mountain Lodge**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2019

Mailing Address 3385 Cody Lane

City  
Teton VillageState  
WYZip Code  
83025Purpose of Disbursement  
Lodging

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : SB.33

Amount of Each Disbursement this Period

817.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2019

Mailing Address 706 Mission St.

City  
San FranciscoState  
CAZip Code  
94103Purpose of Disbursement  
Ground transportation

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB.34

Amount of Each Disbursement this Period

70.78

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1121.37

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Wiley Rein LLP**

Mailing Address 1776 K Street NW

City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Legal services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2019

FEC Identification Number

C

**Transaction ID : SB.10**

Amount of Each Disbursement this Period

630.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Nelson, Emma, , ,**Mailing Address 1747 Pennsylvania Ave. NW  
5th FloorCity  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Travel - see memo entry

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2019

FEC Identification Number

C

**Transaction ID : SB.35**

Amount of Each Disbursement this Period

1038.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Teton Mountain Lodge**

Mailing Address 3385 Cody Lane

City  
Teton VillageState  
WYZip Code  
83025Purpose of Disbursement  
Lodging

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2019

FEC Identification Number

C

**Transaction ID : SB.36**

Amount of Each Disbursement this Period

793.57

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1668.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Conston, Daniel, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2019

Mailing Address 1747 Pennsylvania Ave. NW  
5th FloorCity  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Travel - see memo entries

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB.37**

Amount of Each Disbursement this Period

4693.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2019

Mailing Address 4333 Amon Carter Boulevard

City  
Fort WorthState  
TXZip Code  
76155Purpose of Disbursement  
Airfare

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB.42**

Amount of Each Disbursement this Period

1036.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2019

Mailing Address 1030 Delta Boulevard

City  
AtlantaState  
GAZip Code  
30354Purpose of Disbursement  
Airfare

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB.41**

Amount of Each Disbursement this Period

248.30

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4693.37

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Four Seasons Hotels and Resorts**

Mailing Address 1165 Leslie Street

City  
Toronto, Ontario M3C 2K8

State

Zip Code

Purpose of Disbursement  
Lodging and meals

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.38

Amount of Each Disbursement this Period

2895.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Marriott**

Mailing Address 10400 Fernwood Road

City  
BethesdaState  
MDZip Code  
20817Purpose of Disbursement  
Lodging

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.40

Amount of Each Disbursement this Period

463.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 706 Mission St.

City  
San FranciscoState  
CAZip Code  
94103Purpose of Disbursement  
Ground transportation

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.39

Amount of Each Disbursement this Period

49.26

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Tray - Printing, Mailing, Logistics**

Mailing Address PO Box 1360

City  
Glen BurnieState  
MDZip Code  
21061Purpose of Disbursement  
Stationery

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.30**

Amount of Each Disbursement this Period

328.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Valero Services, Inc.**

Mailing Address PO Box 696000

City  
San AntonioState  
TXZip Code  
78269Purpose of Disbursement  
Event catering

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.7**

Amount of Each Disbursement this Period

1625.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. American Viewpoint, Inc.**Mailing Address 1199 North Lee Street  
Suite 808City  
AlexandriaState  
VAZip Code  
22314Purpose of Disbursement  
Survey

005

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.26**

Amount of Each Disbursement this Period

17380.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

19333.76



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. PCI Payment Solutions**

Mailing Address 902 Chinquapin

City  
McLeanState  
VAZip Code  
22102Purpose of Disbursement  
Merchant fee

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.1

Amount of Each Disbursement this Period

47.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Brandywine Public Affairs, Inc.**

Mailing Address 2201 Mill Road, Apt 214

City  
AlexandriaState  
VAZip Code  
22314Purpose of Disbursement  
Strategy consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.3

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. First National Bank**

Mailing Address P.O. Box 2557

City  
OmahaState  
NEZip Code  
68103Purpose of Disbursement  
Credit card payment - see memo entries

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.17

Amount of Each Disbursement this Period

893.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8440.72

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Mailchimp**Mailing Address 675 Ponce De Leon Ave NE  
#5000City  
AtlantaState  
GAZip Code  
30308Purpose of Disbursement  
Mail services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.18**

Amount of Each Disbursement this Period

127.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Microsoft**

Mailing Address One Microsoft Way

City  
RedmondState  
WAZip Code  
98052Purpose of Disbursement  
Computer services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.19**

Amount of Each Disbursement this Period

351.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Pantheon Systems**

Mailing Address 717 California Street

City  
San FranciscoState  
CAZip Code  
94108Purpose of Disbursement  
Computer services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.21**

Amount of Each Disbursement this Period

132.50

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. WP Engine**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2019

Mailing Address 504 Lavaca Street  
Suite 1000City  
AustinState  
TXZip Code  
78701Purpose of Disbursement  
Computer services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.20

Amount of Each Disbursement this Period

115.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Strategic Advance Services, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2019

Mailing Address 611 Pennsylvania Ave. SE  
Suite 267City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Travel and event planning services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.43

Amount of Each Disbursement this Period

21550.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Advantage Direct Communications**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2019

Mailing Address 2300 Clarendon Blvd.  
Suite 303City  
ArlingtonState  
VAZip Code  
22201Purpose of Disbursement  
Software

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.27

Amount of Each Disbursement this Period

350.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

21900.32
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. E.C. Maruggi Incorporated**

Mailing Address 660 South Howell St.

City  
St. PaulState  
MNZip Code  
55116Purpose of Disbursement  
Administrative consulting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.4**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Majority Strategies, Inc.**Mailing Address 12854 Kenan Drive  
Suite 145City  
JacksonvilleState  
FLZip Code  
32258Purpose of Disbursement  
Non IE GOTV mail

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.28**

Amount of Each Disbursement this Period

50952.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Remington Research Group**Mailing Address 1251 NW Briarcliff Pkwy  
Suite 85City  
Kansas CityState  
MOZip Code  
64116Purpose of Disbursement  
Survey

005

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.29**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

54452.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2019

Mailing Address 1593 Spring Hill Road  
Suite 400City  
Tysons CornerState  
VAZip Code  
22182Purpose of Disbursement  
Merchant fee

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.2

Amount of Each Disbursement this Period

2.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Advantage Direct Communications**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2019

Mailing Address 2300 Clarendon Blvd.  
Suite 303City  
ArlingtonState  
VAZip Code  
22201Purpose of Disbursement  
Non IE GOTV texting

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.46

Amount of Each Disbursement this Period

3431.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Computer Exchange**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2019

Mailing Address 4487 Forbes Boulevard

City  
LanhamState  
MDZip Code  
20706Purpose of Disbursement  
Computer services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB.22

Amount of Each Disbursement this Period

199.81

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3634.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2019

Mailing Address 1593 Spring Hill Road  
Suite 400City  
Tysons CornerState  
VAZip Code  
22182Purpose of Disbursement  
Donor database subscription

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB.6**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jones Day**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2019

Mailing Address 51 Louisiana Ave. NW

City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Legal services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB.11**

Amount of Each Disbursement this Period

8062.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Occasions Caterers**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2019

Mailing Address 655 Taylor St NE

City  
WashingtonState  
DCZip Code  
20017Purpose of Disbursement  
Event catering

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB.8**

Amount of Each Disbursement this Period

4667.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13229.52

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. FLS Connect, LLC**Mailing Address 7300 Hudson Blvd.  
Suite 270City  
St PaulState  
MNZip Code  
55128Purpose of Disbursement  
Conference call services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.23

Amount of Each Disbursement this Period

203.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tray - Printing, Mailing, Logistics**

Mailing Address PO Box 1360

City  
Glen BurnieState  
MDZip Code  
21061Purpose of Disbursement  
Stationery

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.31

Amount of Each Disbursement this Period

278.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Trinity Financial Reporting & Compliance**

Mailing Address PO Box 710993

City  
HerndonState  
VAZip Code  
20171Purpose of Disbursement  
Accounting and compliance

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB.13

Amount of Each Disbursement this Period

5874.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6355.83

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Wiley Rein LLP**

Mailing Address 1776 K Street NW

City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Legal services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.12**

Amount of Each Disbursement this Period

4267.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Action Network**Mailing Address 1747 Pennsylvania Ave. NW  
5th FloorCity  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Cost sharing payment: rent, labor, overhead

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.24**

Amount of Each Disbursement this Period

48357.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jones Day**

Mailing Address 51 Louisiana Ave. NW

City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Legal services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	1	9		

FEC Identification Number

C

**Transaction ID : SB.14**

Amount of Each Disbursement this Period

33804.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

86428.84

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 45

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Action Network**Mailing Address 1747 Pennsylvania Ave. NW  
5th FloorCity  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
In-kind: Research & media analytics

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
09		30		2019

FEC Identification Number

**C****Transaction ID : SB.44**

Amount of Each Disbursement this Period

53407.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

53407.00

**TOTAL** This Period (last page this line number only).....▶

315713.53

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 26 OF 45

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**American Action Network**

Nature of Debt (Purpose):

Amounts owed for services provided

Mailing Address 1747 Pennsylvania Avenue, NW  
5th FloorCity  
WashingtonState  
DCZip Code  
20006

Outstanding Balance Beginning This Period

1088998.70

Transaction ID : SD.001

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1088998.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

1088998.70

2) **TOTALS** This Period (last page this line number only)..... ►

1088998.70

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

1088998.70

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD.001

Amounts owed under cost-sharing agreement for services provided

Form/Schedule:

Transaction ID:

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 28 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Majority Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address 12854 Kenan Drive Suite 145			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 22 / 2019		
City Jacksonville		State FL	Zip Code 32258		Amount <span style="border: 1px solid black; padding: 2px;">9850.58</span>
Purpose of Expenditure Direct mail			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : 001 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 21 / 2019
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">907452.25</span>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General					
Full Name of Payee <b>Majority Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address 12854 Kenan Drive Suite 145			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 26 / 2019		
City Jacksonville		State FL	Zip Code 32258		Amount <span style="border: 1px solid black; padding: 2px;">14465.13</span>
Purpose of Expenditure Direct mail			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : 002 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 23 / 2019
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">921917.38</span>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General					
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">24315.71</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
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, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 10 / 2019

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 29 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>Cavalry</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW #800			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 27 / 2019		
City Washington		State DC	Zip Code 20006		Amount <span style="border: 1px solid black; padding: 2px;">15000.00</span>
Purpose of Expenditure Media placement			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : 003 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 26 / 2019
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">936917.38</span>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General			2019		
Full Name of Payee <b>Cavalry</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW #800			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 27 / 2019		
City Washington		State DC	Zip Code 20006		Amount <span style="border: 1px solid black; padding: 2px;">15000.00</span>
Purpose of Expenditure Media placement			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : 004 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 26 / 2019
Name of Federal Candidate: McCready, Dan, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">951917.38</span>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General			2019		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures .....</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures .....</p> </div> <div style="border: 1px solid black; padding: 5px; width: 200px;"> <p>30000.00</p> </div> </div>					
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.					
Signature Crosby, Caleb, , ,			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 10 / 2019		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>Cavalry</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1634 Eye Street NW #800			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 28 / 2019		
City Washington		State DC	Zip Code 20006		
Purpose of Expenditure Media placement		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">109946.50</span>	
Name of Federal Candidate: McCready, Dan, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1061863.88</span>			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC		
			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
Full Name of Payee <b>FlexPoint Media</b>			<input type="checkbox"/> Memo Item		
Mailing Address PO Box 1051			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 28 / 2019		
City New Albany		State OH	Zip Code 43054		
Purpose of Expenditure Media placement		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">828984.00</span>	
Name of Federal Candidate: McCready, Dan, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1890847.88</span>			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC		
			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">938930.50</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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.					
Signature  Crosby, Caleb, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 10 / 2019	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Something Else Strategies</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 28 / 2019	
Mailing Address 212 Golden Willow Court			Amount <span style="border: 1px solid black; padding: 2px;">13500.00</span>	
City Easley	State SC	Zip Code 29642	Transaction ID : 007 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 28 / 2019	
Purpose of Expenditure Media production		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: McCreedy, Dan, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1904347.88</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	
Full Name of Payee <b>Majority Strategies</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 28 / 2019	
Mailing Address 12854 Kenan Drive Suite 145			Amount <span style="border: 1px solid black; padding: 2px;">11674.41</span>	
City Jacksonville	State FL	Zip Code 32258	Transaction ID : 008 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 28 / 2019	
Purpose of Expenditure Direct mail		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: Bishop, Dan, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1916022.29</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">25174.41</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
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, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 10 / 2019	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 28 / 2019		
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <span style="border: 1px solid black; padding: 2px;">3733.44</span>		
City Arlington		State VA	Zip Code 22201		Transaction ID : 009
Purpose of Expenditure Phone calls		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 29 / 2019	
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 09 State: NC		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1919755.73</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
Full Name of Payee <b>Majority Strategies</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 30 / 2019		
Mailing Address 12854 Kenan Drive Suite 145			Amount <span style="border: 1px solid black; padding: 2px;">14543.67</span>		
City Jacksonville		State FL	Zip Code 32258		Transaction ID : 010
Purpose of Expenditure Direct mail		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 08 / 29 / 2019	
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 09 State: NC		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1934299.40</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">18277.11</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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.					
Signature  Crosby, Caleb, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 10 / 2019	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00504530       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           3479.04         </div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : 011</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Bishop, Dan, , ,	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1937778.44</div>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 09 State: NC		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		

Full Name of Payee <input type="checkbox"/> Memo Item <b>FlexPoint Media</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 1051			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           236000.00         </div>	
City New Albany	State OH	Zip Code 43054	<b>Transaction ID : 012</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Media placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose McCready, Dan, , ,	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2173778.44</div>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 09 State: NC		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">239479.04</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 03 / 2019		
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <span style="border: 1px solid black; padding: 2px;">3351.84</span>		
City Arlington		State VA	Zip Code 22201		Transaction ID : 013
Purpose of Expenditure Phone calls		Category/ Type 004		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 04 / 2019	
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: NC		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">2177130.28</span> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
Full Name of Payee <b>Majority Strategies</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 03 / 2019		
Mailing Address 12854 Kenan Drive Suite 145			Amount <span style="border: 1px solid black; padding: 2px;">26991.12</span>		
City Jacksonville		State FL	Zip Code 32258		Transaction ID : 014
Purpose of Expenditure Direct mail		Category/ Type 004		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 04 / 2019	
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: NC		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">2204121.40</span> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">30342.96</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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.					
Signature <u>Crosby, Caleb, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2019		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Majority Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address 12854 Kenan Drive Suite 145			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 03 / 2019		
City Jacksonville		State FL	Zip Code 32258		Amount <span style="border: 1px solid black; padding: 2px;">13403.48</span>
Purpose of Expenditure Direct mail			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : 015 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 04 / 2019
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">2217524.88</span>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶			Special General		
Full Name of Payee <b>Majority Strategies</b>			<input type="checkbox"/> Memo Item		
Mailing Address 12854 Kenan Drive Suite 145			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 03 / 2019		
City Jacksonville		State FL	Zip Code 32258		Amount <span style="border: 1px solid black; padding: 2px;">13403.48</span>
Purpose of Expenditure Direct mail			Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Transaction ID : 016 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 04 / 2019
Name of Federal Candidate: McCready, Dan, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">2230928.36</span>		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶			Special General		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">26806.96</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
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, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2019

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on	
Full Name of Payee <b>FlexPoint Media</b> <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 04 / 2019</b>	
Mailing Address <b>PO Box 1051</b>				Amount <b>46000.00</b>	
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	Transaction ID : <b>017</b>	
Purpose of Expenditure <b>Media placement</b>			Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>08 / 29 / 2019</b>	
Name of Federal Candidate: <b>McCready, Dan, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: <b>09</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought <b>2276928.36</b>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) <b>Special General</b>	
Full Name of Payee <b>Cavalry</b> <input type="checkbox"/> Memo Item				Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 04 / 2019</b>	
Mailing Address <b>1634 Eye Street NW #800</b>				Amount <b>25000.00</b>	
City <b>Washington</b>		State <b>DC</b>	Zip Code <b>20006</b>	Transaction ID : <b>018</b>	
Purpose of Expenditure <b>Media placement</b>			Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>08 / 30 / 2019</b>	
Name of Federal Candidate: <b>McCready, Dan, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: <b>09</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought <b>2301928.36</b>				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) <b>Special General</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....				<b>71000.00</b>	
(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.					
Signature <b>Crosby, Caleb, , ,</b>				Date MM / DD / YYYY <b>10 / 10 / 2019</b>	
[Electronically Filed]					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 37 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00504530</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Something Else Strategies</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>212 Golden Willow Court</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 5px;">13500.00</div>	
City <b>Easley</b>	State <b>SC</b>	Zip Code <b>29642</b>	<b>Transaction ID : 019</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>Media production</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate: <b>McCreedy, Dan, , ,</b> <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div>			Office Sought: <input checked="" type="checkbox"/> House District: <b>09</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 5px;">2315428.36</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) <span style="margin-left: 10px;">Special General</span>	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>2300 Clarendon Blvd</b> <b>Suite 303</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 5px;">11469.12</div>	
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22201</b>	<b>Transaction ID : 020</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>Phone calls</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate: <b>Bishop, Dan, , ,</b> <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div>			Office Sought: <input checked="" type="checkbox"/> House District: <b>09</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NC</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 5px;">2326897.48</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) <span style="margin-left: 10px;">Special General</span>	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	24969.12
(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

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 38 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00504530       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">           2161.92         </div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : 021</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Bishop, Dan, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2329059.40</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">           2161.92         </div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : 022</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: McCready, Dan, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2331221.32</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	4323.84
(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

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 39 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00504530</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2669.42</div>	
City Arlington	State VA	Zip Code 22201		
Purpose of Expenditure Text messages		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	<b>Transaction ID : 023</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Bishop, Dan, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; float: right;">2333890.74</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span> Special General	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3384.48</div>	
City Arlington	State VA	Zip Code 22201		
Purpose of Expenditure Phone calls		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	<b>Transaction ID : 024</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Bishop, Dan, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; float: right;">2337275.22</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span> Special General	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">6053.90</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 40 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>	
Full Name of Payee <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 09 / 06 / 2019		
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <span style="border: 1px solid black; padding: 2px;">750.00</span>		
City Arlington	State VA	Zip Code 22201	Transaction ID : 025 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 09 / 07 / 2019		
Purpose of Expenditure Phone calls		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Bishop, Dan, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">2338025.22</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
Full Name of Payee <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 09 / 07 / 2019		
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <span style="border: 1px solid black; padding: 2px;">12893.48</span>		
City Arlington	State VA	Zip Code 22201	Transaction ID : 026 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 09 / 08 / 2019		
Purpose of Expenditure Phone calls		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Bishop, Dan, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">2350918.70</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">13643.48</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> 10 / 10 / 2019	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 41 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00504530       </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2202.00</div>	
City Arlington	State VA	Zip Code 22201		
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<b>Transaction ID : 027</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Bishop, Dan, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2353120.70</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2202.00</div>	
City Arlington	State VA	Zip Code 22201		
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<b>Transaction ID : 028</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: McCready, Dan, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2355322.70</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	4404.00
(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

10

10

2019

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 42 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00504530       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1619.31</div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : 029</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Bishop, Dan, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">2356942.01</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2203.92</div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : 030</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Bishop, Dan, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">2359145.93</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	3823.23
(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

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 43 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00504530       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2203.92</div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : 031</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose McCready, Dan, , ,	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2361349.85</div>			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">22849.55</div>	
City Arlington	State VA	Zip Code 22201	<b>Transaction ID : 032</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Phone calls		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Bishop, Dan, , ,	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2384199.40</div>			Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	25053.47
(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

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 44 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00504530       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Advantage Direct Communications</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">09</div> <div style="width: 15%;">09</div> <div style="width: 70%;">2019</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3734.12</div>	
City Arlington		State VA		Zip Code 22201	
Purpose of Expenditure Text messages				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: Bishop, Dan, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NC	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2387933.52</div>	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General	
Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Advantage Direct Communications</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">09</div> <div style="width: 15%;">10</div> <div style="width: 70%;">2019</div> </div>	
Mailing Address 2300 Clarendon Blvd Suite 303				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">13061.58</div>	
City Arlington		State VA		Zip Code 22201	
Purpose of Expenditure Phone calls				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: Bishop, Dan, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NC	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">2400995.10</div>	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">16795.70</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div>					
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.					
Signature <u>Crosby, Caleb, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">10</div> <div style="width: 15%;">10</div> <div style="width: 70%;">2019</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 45 OF 45  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Advantage Direct Communications</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 10 / 2019		
Mailing Address 2300 Clarendon Blvd Suite 303			Amount <span style="border: 1px solid black; padding: 2px;">1410.57</span>		
City Arlington		State VA	Zip Code 22201		Transaction ID : 035
Purpose of Expenditure Text messages		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 09 / 12 / 2019	
Name of Federal Candidate: Bishop, Dan, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2402405.67</span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2019 <input checked="" type="checkbox"/> Other (specify) ▶ Special General		
Full Name of Payee			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Mailing Address			Amount <span style="border: 1px solid black; padding: 2px;"></span>		
City		State	Zip Code		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Purpose of Expenditure		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>			
Name of Federal Candidate:			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		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 <span style="border: 1px solid black; padding: 2px;"></span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">1410.57</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">1504804.00</span>		
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.					
Signature <i>Crosby, Caleb, , ,</i>			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 10 / 2019