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

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if X 24-hour report 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
KAP Print	M   M / D   D / Y   Y   Y   Y
Mailing Address 220 Quinn Drive	10 26 2020 Amount
City State Zip Code	29021.58
Dripping Springs TX 78620	Transaction ID : SE.001  Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail  Category/ Type  004	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ee Sought: 🗶 House District:02
Elliott, Joyce , , ,	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought  Disb 2020	oursement For: Primary ★ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Dist	pursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	29021.58
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	
(c) TOTAL Independent Expenditures	29021.58
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Crosby, Caleb, , ,	M / D D / Y Y Y Y Y
Signature [Electronically Filed] Date	10 27 2020
Oignataro	