10/25/2018 20 : 49

Image# 201810259133382928 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)		HUNLS		PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER V
Congressional Leadership Fu	nd		C	C00504530
Check if X 24-hour report 48-hour	report X New rep	port Amends repo	ort filed on	
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Nebo Media			M M 10	/ D D / Y Y Y Y 24 2018
Mailing Address PO Box 9825			Amount	
City	State	Zip Code		165970.00
Arlington	VA	22219	Transaction	n ID : 001
Purpose of Expenditure Media Placement		Category/ Type 004		bursement or Obligation / D D / Y Y Y Y 19 / 2018
Name of Federal Candidate		Support	Office Sought:	K House District: 01
Pureval, Aftab, , ,		× Oppose	President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		3366010.77	Disbursement For: 2018	Primary X General
Full Name of Payee				blic Distribution/Dissemination
Nebo Media			Date of Pub	/ D D / Y Y Y Y 24 2018
Mailing Address PO Box 9825				24 2010
			Amount	
City	State	Zip Code		165970.00
Arlington	VA	22219	Transaction Date of Disl	ID:002 bursement or Obligation
Purpose of Expenditure Media Placement		Category/ Type 004	^M 10 ^M	/ D D / Y Y Y Y 19 2018
Name of Federal Candidate		X Support	Office Sought:	K House District: 01
Chabot, Steve, , ,		Oppose	President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		3531980.77	Disbursement For: 2018 Other (s	Primary X General Specify) ►
(a) SUBTOTAL of Itemized Independent	Expenditures			331940.00
(b) SUBTOTAL of Unitemized Independe	ent Expenditures		••	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized			
Crosby, Caleb, , ,	Electro	nically Filed] Date		
Signature		Date	e 10 25	2018

Image# 201810259133382929 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	thedule E)		DITORES			PAGE 2 OF 2 FOR SE OF FORM 24/48
NA	ME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER
Congressional Leadership Fund						C00504530
					U	
Ch	eck if 🗴 24-hour report 📃 48-hour rep	ort 🗶 New m	eport Amends rep		M	/ D = D / Y = Y = Y = Y
	Full Name of Payee			Date	of Publi	c Distribution/Dissemination
	FP1 Strategies				10 ^M	/ D D / Y Y Y Y 24 2018
	Mailing Address 3001 Washington Blvd, 7th	Amou	Amount			
	City	State	Zip Code			8630.00
	Arlington	VA	22201			ID:003 ursement or Obligation
	Purpose of Expenditure Media Production		Category/ Type 004		10	/ D D / Y Y Y Y 24 2018
	Name of Federal Candidate		Support	Office Sough	nt:	X House District: 01
	Pureval, Aftab, , ,		× Oppose	Presid	ent	Senate State: OH
	Calendar Year-To-Date Per Election for Office Sought		3540610.77	Disbursemer 2018		Primary Seneral
	Full Name of Payee					ic Distribution/Dissemination
	FP1 Strategies				10 ^M	/ D D / Y Y Y Y 24 2018
	Mailing Address 3001 Washington Blvd, 7	th Floor		Amou		
	City	State	Zip Code			8630.00
	Arlington	VA	22201		action II of Disb	
	Purpose of Expenditure Media Production		Category/ Type 004		10 ^M	/ D_D / Y_Y_Y_Y 2018
	Name of Federal Candidate		X Support	Office Sough	nt:	X House District: 01
	Chabot, Steve, , ,		Oppose	Presid	ent	Senate State: OH
	Calendar Year-To-Date Per Election for Office Sought		3549240.77	Disbursemer 2018		Primary X General
	L				other (sp	pecify)
	(a) SUBTOTAL of Itemized Independent Exp	penditures		•••	-7-	17260.00
	(b) SUBTOTAL of Uniternized Independent B	Expenditures		··· ► []	-7-	
	(c) TOTAL Independent Expenditures			▶		349200.00
	Under penalty of perjury I certify that the inv with, or at the request or suggestion of, any party committee) any political party committe	candidate or authoriz				
	Crosby, Caleb, , ,	[Electr	onically Filed] Dat	e 10	25	2018
	Signature					