24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Mentzer Media Services	M M / D D / Y Y Y Y
Mailing Address 210 W. Pennsylvania Ave.	03 07 2017 Amount
Suite 250	Amount
City State Zip Code	700050.00
Towson MD 21204	Transaction ID: 001 Date of Disbursement or Obligation
Purpose of Expenditure Media placement and production Category/ Type 004	03
Name of Federal Candidate Support Office	e Sought: X House District: 01
Quist, Rob, , ,	President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought Disbut 2017	ursement For: Primary General ★ Other (specify) ► Special
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y
Mailing Address	
	Amount
City State Zip Code	
	Data of Bishamana and an Ohlinatian
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbu	ursement For: Primary General
Per Election for Office Sought	Other (specify)
-	
(a) SUBTOTAL of Itemized Independent Expenditures	700050.00
(1) OUD-0-11 (1) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	700050.00
	700030.00
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
Crosby, Caleb, , ,	-M / D - D / Y - Y - Y
(77)	03 09 2017
Oignature	