

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

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

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 checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Nebo Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>08 / 29 / 2018</b>	
Mailing Address <b>PO Box 9825</b>		Amount <b>64000.00</b>	
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22219</b>	Transaction ID : <b>001</b>
Purpose of Expenditure <b>Media Placement</b>		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>08 / 23 / 2018</b>
Name of Federal Candidate <b>Wallace, Scott, ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought		<b>64000.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Nebo Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>08 / 29 / 2018</b>	
Mailing Address <b>PO Box 9825</b>		Amount <b>410349.42</b>	
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22219</b>	Transaction ID : <b>002</b>
Purpose of Expenditure <b>Media Placement</b>		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>08 / 23 / 2018</b>
Name of Federal Candidate <b>Wallace, Scott, ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought		<b>474349.42</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>474349.42</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.

Crosby, Caleb, ,

[Electronically Filed]

Date

MM / DD / YYYY  
**08 / 31 / 2018**

Signature

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 PAGE 2 OF 3  
 FOR SE OF FORM 24/48

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 checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M					D	D					Y	Y	Y	Y	Y	Y						
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Full Name of Payee <b>FP1 Strategies</b>			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>M</td><td>M</td><td></td></tr><tr><td>08</td><td></td><td></td></tr></table> / <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>D</td><td>D</td><td></td></tr><tr><td>29</td><td></td><td></td></tr></table> / <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 2018			M	M		08			D	D		29			Y	Y	Y	Y	Y	Y						
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Mailing Address 3001 Washington Blvd, 7th Floor			Amount <table border="1" style="width:100%"><tr><td>17440.00</td></tr></table>			17440.00																							
17440.00																													
City Arlington	State VA	Zip Code 22201	Transaction ID : 003																										
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>M</td><td>M</td><td></td></tr><tr><td>08</td><td></td><td></td></tr></table> / <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>D</td><td>D</td><td></td></tr><tr><td>29</td><td></td><td></td></tr></table> / <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 2018			M	M		08			D	D		29			Y	Y	Y	Y	Y	Y						
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Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%"><tr><td>491789.42</td></tr></table>	491789.42	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►																									
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Full Name of Payee <b>Creative Direct</b>			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>M</td><td>M</td><td></td></tr><tr><td>08</td><td></td><td></td></tr></table> / <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>D</td><td>D</td><td></td></tr><tr><td>29</td><td></td><td></td></tr></table> / <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 2018			M	M		08			D	D		29			Y	Y	Y	Y	Y	Y						
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City Richmond	State VA	Zip Code 23219	Transaction ID : 004																										
Purpose of Expenditure Doorhangers		Category/ Type 004	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>M</td><td>M</td><td></td></tr><tr><td>08</td><td></td><td></td></tr></table> / <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>D</td><td>D</td><td></td></tr><tr><td>29</td><td></td><td></td></tr></table> / <table border="1" style="display:inline-table; margin:0 5px;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 2018			M	M		08			D	D		29			Y	Y	Y	Y	Y	Y						
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Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%"><tr><td>493033.58</td></tr></table>	493033.58	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►																									
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(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<table border="1" style="width:100%"><tr><td>18684.16</td></tr></table>	18684.16
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Crosby, Caleb, , ,

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Signature

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City Richmond	State VA	Zip Code 23219	Transaction ID : 005										
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Purpose of Expenditure		Category/ Type											
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: _____										
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(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<table border="1"> <tr> <td colspan="5">1244.17</td> </tr> </table>	1244.17				
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Date

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08		31		2018