

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on MM / DD / YYYY					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 44375.00		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2088
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2024	
Name of Federal Candidate SHAH, AMISH, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought			7752031.48 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1013.42		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2157
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 11 / 02 / 2024	
Name of Federal Candidate CISCOMANI, JUAN, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought			7524790.05 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			45388.42		
(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 Crosby, Caleb, , ,			Date MM / DD / YYYY 11 / 03 / 2024		

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

PAGE 2 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 44375.00		
City NEW ALBANY		State OH	Zip Code 43054		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 10 / 30 / 2024		
Name of Federal Candidate ENGEL, KIRSTEN, , ,			Office Sought: ☒ House District: 06 ☐ President ☐ Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 3550.00		
City NEW ALBANY		State OH	Zip Code 43054		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 10 / 30 / 2024		
Name of Federal Candidate GRAY, ADAM, , ,			Office Sought: ☒ House District: 13 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			47925.00		
(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.					
Signature Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024		

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

PAGE 3 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 3550.00		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2091
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 10 / 30 / 2024	
Name of Federal Candidate SALAS, RUDY, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			7381470.01 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1638.00		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2158
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate VALADAO, DAVID, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought			7381470.01 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			5188.00		
(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.					
Signature Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024		

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

PAGE 4 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2024
Mailing Address PO BOX 1051		Amount 28843.75
City NEW ALBANY	State OH	Zip Code 43054
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	Transaction ID : SE24.2093 Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2024
Name of Federal Candidate WHITESIDES, GEORGE, , ,		Office Sought: ☒ House District: 27 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2024
Mailing Address PO BOX 1051		Amount 59906.25
City NEW ALBANY	State OH	Zip Code 43054
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	Transaction ID : SE24.2107 Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2024
Name of Federal Candidate TRAN, DEREK, , ,		Office Sought: ☒ House District: 45 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	88750.00
(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, , ,

Signature

Date

MM / DD / YYYY
11 / 03 / 2024

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

PAGE 5 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1658.80		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2160
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate HURD, JEFFREY, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: CO
Calendar Year-To-Date Per Election for Office Sought			334763.76 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1222.07		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2159
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate EVANS, TIMOTHY GABRIEL, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: CO
Calendar Year-To-Date Per Election for Office Sought			6668037.42 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			2880.87		
(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 Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024		

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

PAGE 6 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 22631.75		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2095
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2024	
Name of Federal Candidate BOHANNAN, CHRISTINA, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: IA
Calendar Year-To-Date Per Election for Office Sought			3547674.03 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1872.07		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2162
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate MILLER-MEEKS, MARIANNETTE, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: IA
Calendar Year-To-Date Per Election for Office Sought			3547674.03 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			24503.82		
(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 Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024		

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

PAGE 7 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 28178.13		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2094
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 10 / 30 / 2024	
Name of Federal Candidate BACCAM, LANON, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 4507276.93			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 2637.51		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2161
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate NUNN, ZACH, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 4507276.93			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			30815.64		
(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 Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024		

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

PAGE 8 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1331.59		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2164 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004			
Name of Federal Candidate BARRETT, THOMAS, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			10322981.99 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 44375.00		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2096 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2024
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004			
Name of Federal Candidate HERTEL, CURTIS, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			10322981.99 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			45706.59		
(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 Crosby, Caleb, , , Date M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024					

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

PAGE 9 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 2054.52		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2163 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004			
Name of Federal Candidate JUNGE, PAUL, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			5040275.50 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1165.71		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2165 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004			
Name of Federal Candidate ZINKE, RYAN, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: MT
Calendar Year-To-Date Per Election for Office Sought			370575.72 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			3220.23		
(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.					
Signature Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 10 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 2040.35		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2166 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Name of Federal Candidate BUCKHOUT, LAURIE, , , ☒ Support ☐ Oppose Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought 9217846.72					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 39050.00		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2097 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2024
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004		Name of Federal Candidate DAVIS, DON, , , ☐ Support ☒ Oppose Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought 9217846.72					
(a) SUBTOTAL of Itemized Independent Expenditures.....			41090.35		
(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 Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 11 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2024
Mailing Address PO BOX 1051		Amount 26625.00
City NEW ALBANY	State OH	Zip Code 43054
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	Transaction ID : SE24.2098 Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2024
Name of Federal Candidate VARGAS, ANTHONY, , ,		Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2024
Mailing Address PO BOX 1051		Amount 66562.50
City NEW ALBANY	State OH	Zip Code 43054
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	Transaction ID : SE24.2119 Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2024
Name of Federal Candidate VARGAS, ANTHONY, , ,		Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	93187.50
(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, , ,

Signature

Date

MM / DD / YYYY
11 / 03 / 2024

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 12 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 2447.84		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2168
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate LAWLER, MICHAEL, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 17 ☐ President ☐ Senate State: NY
Calendar Year-To-Date Per Election for Office Sought			11041770.33 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 2796.56		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2167
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate MOLINARO, MARCUS, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 19 ☐ President ☐ Senate State: NY
Calendar Year-To-Date Per Election for Office Sought			8300635.45 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			5244.40		
(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 Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024		

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

PAGE 13 OF 16

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 1473.25		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2103
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2024	
Name of Federal Candidate KAPTUR, MARCY, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 3308.50		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2169
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate MERRIN, DEREK, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 09 ☐ President ☐ Senate State: OH
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			4781.75		
(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 Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 14 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1736.61		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2170 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004			
Name of Federal Candidate CHAVEZ-DEREMER, LORI, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: OR
Calendar Year-To-Date Per Election for Office Sought			5659709.39 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 2743.26		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2171 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004			
Name of Federal Candidate MACKENZIE, RYAN, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought			9669455.73 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			4479.87		
(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 Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 15 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 57687.50		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2105
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 10 / 30 / 2024	
Name of Federal Candidate WILD, SUSAN, , ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought			9669455.73 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 2670.14		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2172
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024	
Name of Federal Candidate BRESNAHAN, ROB, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought			7251856.24 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			60357.64		
(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 Crosby, Caleb, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 16 OF 16
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee FLEXPOINT MEDIA INC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address PO BOX 1051			Amount 66562.50		
City NEW ALBANY		State OH	Zip Code 43054		Transaction ID : SE24.2104 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 10 / 30 / 2024
Purpose of Expenditure MEDIA PLACEMENT			Category/ Type 004		
Name of Federal Candidate CARTWRIGHT, MATTHEW, , ,			☐ Support ☒ Oppose Office Sought: ☒ House District: 08 ☐ President ☐ Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought 7251856.24			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee P2P MESSAGING			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54			Amount 1925.37		
City MCLEAN		State VA	Zip Code 22101		Transaction ID : SE24.2173 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024
Purpose of Expenditure TEXT MESSAGES			Category/ Type 004		
Name of Federal Candidate KIGGANS, JENNIFER, , ,			☒ Support ☐ Oppose Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought 2800357.82			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶					68487.87
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					572007.95
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 M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024	