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

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 file	ed on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
FlexPoint Media	M = M / D = D / Y = Y = Y
Mailing Address PO Box 1051	09 09 2020
	Amount
City State Zip Code	780700.00
New Albany OH 43054	Transaction ID : SE.001 Date of Disbursement or Obligation
Purpose of Expenditure Media placement Category/ Type 004	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offi	ce Sought: House District: 02
Gordon, Jackie, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Disl 202	bursement For: Primary X General Other (specify) ▶
Full Name of Payee National Media	Date of Public Distribution/Dissemination
- National Wedia	09 09 / 2020
Mailing Address 815 Slaters Lane	Amount
City State Zip Code	59000.00
Alexandria VA 22314	Transaction ID : SE.002 Date of Disbursement or Obligation
Purpose of Expenditure Media placement Category/ Type 004	09 / 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offi	ice Sought:
Gordon, Jackie, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Dis 202	bursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	839700.00
	300100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Crosby, Caleb, , , [Electronically Filed] Date	09 11 2020
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report	
Full Name of Payee	Date of Public Distribution/Dissemination
Jamestown Associates	09 09 1 2020
Mailing Address 421 Chestnut Street	Amount
City State Zip Code	10500.00
Philadelphia PA 19106	Transaction ID : SE.003 Date of Disbursement or Obligation
Purpose of Expenditure Media production Category/ Type 004	09 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support C	Office Sought: House District: 02
Gordon, Jackie, , ,	President Senate State: NY
Calchai Ical Io Daic	oisbursement For: Primary X General O20 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
	Amount
City State Zip Code	
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Oppose	Office Sought: House District:
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	10500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
	75 75 75
(c) TOTAL Independent Expenditures	850200.00
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 Signature	09 11 2020
Oignature	