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

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		
Full Name of Payee	Date of Public Distribution/Dissemination	
FlexPoint Media	M M / D D / Y Y Y Y	
Mailing Address PO Box 1051	09 30 2020 Amount	
City State Zip Code	471195.57	
New Albany OH 43054	Transaction ID : SE.001 Date of Disbursement or Obligation	
Purpose of Expenditure Media placement Category/ Type 004	09 25 2020	
Name of Federal Candidate Support Offic	e Sought: X House District: 02	
Hart, Rita, , ,	President Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought Disb 2020	ursement For: Primary General Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
Majority Strategies	M M / D D / Y Y Y Y	
Mailing Address PO Box 679219	09 30 2020	
1 0 50% 07 32 19	Amount	
City State Zip Code	31331.77	
Dallas TX 75267	Transaction ID : SE.002	
Purpose of Expenditure Category/	Date of Disbursement or Obligation	
Media placement Odlegory 004 Type 004	09 28 2020	
Name of Federal Candidate Support Office	e Sought: X House District: 02	
Hart, Rita, , ,	President Senate State: IA	
	ursement For: Primary X General	
Per Election for Office Sought 959493.18	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		
(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.		
	10 02 2020	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

S	chedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
V/	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
C	Congressional Leadership Fund	C C00504530
Check if 24-hour report		
	Full Name of Payee Something Else Strategies	Date of Public Distribution/Dissemination
	Mailing Address 212 Golden Willow Court	09 30 2020 Amount
	City State Zip Code Easley SC 29642	13000.00 Transaction ID : SE.003
	Purpose of Expenditure Media production Category/ Type 004	Date of Disbursement or Obligation M M O O O O O O O O O O O O O O O O O
	Name of Federal Candidate Support Offic	e Sought: X House District: 02
	Hart, Rita, , ,	President Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought Disb 2020	ursement For: Primary X General Other (specify) ▶
	Full Name of Payee	Date of Public Distribution/Dissemination
	Mailing Address	Amount
	City State Zip Code	
	Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
	Name of Federal Candidate Support Oppose	e Sought: House District:
	Calendar Year-To-Date Per Election for Office Sought	ursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures	13000.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	515527.34
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.		
	(77)	10 02 2020