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

Schedule E)	FOR SE OF FORM 24/48
IAME 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	i on Mam / Dad / Yayayay
Full Name of Payee	Data of Dublic Distribution/Discouring stiers
FlexPoint Media	Date of Public Distribution/Dissemination
Mailing Address PO Box 1051	09 30 2020
	Amount
City State Zip Code	185000.00
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:
Dirksen Londrigan, Betsy, , ,	President Senate State: IL
Calendar Year-To-Date Per Election for Office Sought Disb 208501.82	ursement For: Primary X General Other (specify) ▶
Full Name of Payee Majority Strategies	Date of Public Distribution/Dissemination
	09 / 30 / 2020
Mailing Address PO Box 679219	Amount
City State Zip Code	15354.77
Dallas TX 75267	Transaction ID : SE.002 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 Office	e Sought: 🗶 House District:13
Dirksen Londrigan, Betsy, , ,	President Senate State: IL
Calendar Year-To-Date Per Election for Office Sought Disb 2020	ursement For: Primary General Other (specify) ☐ Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	200354.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
	10 02 / 2020
Signature	

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	d on
Full Name of Payee Prime Media Partners	Date of Public Distribution/Dissemination
	09 30 2020
Mailing Address 4201 Wilson Blvd.	Amount
#110-126	
City State Zip Code Arlington VA 22203	12910.00 Transaction ID : SE.003
g	Date of Disbursement or Obligation
Purpose of Expenditure Media production Category/ Type 004	09 / 30 / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: 🗶 House District: 13
Dirksen Londrigan, Betsy, , ,	President Senate State: IL
Calcitaat to a to bate	ursement For: Primary X General
Per Election for Office Sought 236766.59 2020	Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Majority Strategies	09 25 2020
Mailing Address PO Box 679219	Amount
City State Zip Code	13336.50
Dallas TX 75267	Transaction ID : SE.004
Purpose of Expenditure Category/ Category/ Category/	Date of Disbursement or Obligation
Direct mail Direct mail Oategory Type 004	10 02 2020
Name of Federal Candidate Support Office	ce Sought: 🗶 House District:13
Davis, Rodney, , ,	President Senate State: IL
	oursement For: Primary K General
Per Election for Office Sought 250103.09 202	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	26246.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(-,	7 7 7
(c) TOTAL Independent Expenditures	226601.27
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Crooky Calab	
	10 02 2020
Signature	