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 X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y
Full Name of Payee Nebo Media	Date of Public Distribution/Dissemination
	10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 9825	Amount
City State Zip Code	266698.93
Arlington VA 22219	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	10 19 2018
Name of Federal Candidate Support Office	Sought: House District: 22
Brindisi, Anthony, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Disbur 2018	rsement For: Primary General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
FP1 Strategies	10 23 2018
Mailing Address 3001 Washington Blvd, 7th Floor	Amount
City State Zip Code	17350.00
Arlington VA 22201	Transaction ID : 002 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Fodoral Condidate	
Drindiai Anthony	Sought: House District: 22 President Senate State: NY
п оррозс	President Senate State.
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	rsement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	284048.93
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	284048.93
Under penalty of perjury I certify that the independent expenditures reported herein were not may 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.	•
Crosby, Caleb, , , [Electronically Filed] Date 10) 24 2018
Signature	