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

Sche	dule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			
Congressional Leadership Fund			
			C C00504530
Check if 24-hour report			
	Name of Payee		Date of Public Distribution/Dissemination
	lational Media		10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ма	ailing Address 815 Slaters Ln		10 07 2020 Amount
Cit	y State	Zin Codo	46250.00
	exandria VA	Zip Code 22314	Transaction ID : SE.001 Date of Disbursement or Obligation
	rpose of Expenditure edia Placement	Category/ Type 004	10 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Na	me of Federal Candidate	Support	Office Sought: X House District: 03
Ki	nd, Ron, , ,	X Oppose	President Senate State: WI
	Calendar Year-To-Date Per Election for Office Sought	1113792.01	Disbursement For: Primary ★ General 2020 Other (specify) ▶
Fu	Il Name of Payee		Date of Public Distribution/Dissemination
			M = M / D = D / Y = Y = Y
Ma	ailing Address		
			Amount
Cit	ty State	Zip Code	
Pu	rpose of Expenditure	Catamanul	Date of Disbursement or Obligation
	,	Category/ Type	M = M / D = D / Y = Y = Y
Na	ame of Federal Candidate	Support	Office Sought: House District:
		Oppose	President Senate State:
	Calendar Year-To-Date		Disbursement For: Primary General
	Per Election for Office Sought		Other (specify) ▶
(a)	SUBTOTAL of Itemized Independent Expenditures		46250.00
(b)	SUBTOTAL of Unitemized Independent Expenditures		>
(c)	TOTAL Independent Expenditures		40070.00
(0)	TOTAL Masportation Exportation		46250.00
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, , ,	ically Filed] Date	10 09 2020
-	Signature	Date	2020