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

Schedule E)		PAGE 1 OF 4 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	ort Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee  Cavalry LLC		Date of Public Distribution/Dissemination
		09 07 2022
Mailing Address 1634 Eye Street NW		Amount
#800 City State	Zip Code	36000.00
Washington DC	20006	Transaction ID : 001
Purpose of Expenditure Digital Placement	Category/ Type 004	Date of Disbursement or Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	ce Sought:   House District: 02
Kistner, Tyler, , ,	Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	36000.00 Dist 2022	bursement For: Primary General  Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Cavalry LLC		09 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1634 Eye Street NW		Amount
#800		
City State Washington DC	Zip Code 20006	36000.00  Transaction ID : 002  Date of Disbursement or Obligation
Purpose of Expenditure Digital Placement	Category/ Type 004	08 31 2022
Name of Federal Candidate	Support Offi	ce Sought:  House District: 02
Craig, Angela, , ,	<b>X</b> Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	72000.00 Diss 202	bursement For: Primary <b>X</b> General 22 Other (specify) ▶
	<u>'</u>	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	72000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reported herein were not 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, , ,  [Electroni Signature	cally Filed] Date	09 / 09 / 2022

## 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			
Full Name of Payee	Date of Public Distribution/Dissemination		
FlexPoint Media Inc	M M / D D / Y Y Y Y		
Mailing Address PO Box 1051	09 07 2022 Amount		
City State Zip Code	57224.43		
New Albany OH 43054	Transaction ID: 003 Date of Disbursement or Obligation		
Purpose of Expenditure Media Placement  Category/ Type 004	M M M / 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: 02		
Kistner, Tyler, , , Oppose	President Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2022	ursement For: Primary   General  Other (specify)		
Full Name of Payee	Date of Public Distribution/Dissemination		
FlexPoint Media Inc	M M / D D / Y Y Y Y Y		
Mailing Address PO Box 1051	09 07 2022		
1 0 500 1001	Amount		
City State Zip Code	515019.88		
New Albany OH 43054	Transaction ID : 004 Date of Disbursement or Obligation		
Purpose of Expenditure  Category/ Category/	M M / D D / Y Y Y		
Media Placement Type 004	09 02 2022		
Name of Federal Candidate Support Office	e Sought:		
Craig, Angela, , ,	President Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2022			
	Other (specify) -		
(a) SUBTOTAL of Itemized Independent Expenditures	572244.31		
(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.			
24.0	9 09 2022		
Signature			

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

Schedule E)		FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		
		C C00504530
Check if 24-hour report 48-hour report Ne	ew report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
RumbleUp, LLC		M = M / D = D / Y = Y = Y
Mailing Address 2001 K St NW		09 07 2022
5 2001 K St NW		Amount
City State	Zip Code	2550.00
Washington DC	20006	Transaction ID : 005
Tradimington		Date of Disbursement or Obligation
Purpose of Expenditure Text Messages	Category/ Type 004	09 07 Y 2022
Name of Federal Candidate	<b>✗</b> Support Office	e Sought: X House District: 02
Kistner, Tyler, , ,	Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	Disbu 646794.31 2022	ursement For: Primary X General
Fer Election for Office Sought	010701.01	Other (specify) -
Full Name of Payee RumbleUp, LLC		Date of Public Distribution/Dissemination
Trainisioop, 220		09 07 2022
Mailing Address 2001 K St NW		Amount
City State	Zip Code	2550.00
Washington DC	20006	Transaction ID : 006 Date of Disbursement or Obligation
Purpose of Expenditure Text Messages	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: X House District: 02
Craig, Angela, , ,	X Oppose	President Senate State: MN
Calendar Year-To-Date	0000	ursement For: Primary X General
Per Election for Office Sought	649344.31	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·····	5100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>•</b>	
/ \		
(c) TOTAL Independent Expenditures	•	1 4 1 4 1 4
Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or auth party committee) any political party committee or its agent.	•	
Crosby, Caleb, , ,	lectronically Filed] Date 0	9 09 2022
Signature	Date 0	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DITORIES	PAGE 4 OF 4 FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
check if 24-hour report <b>X</b> 48-hour report <b>N</b> New re	eport Amends report	rt filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Red Elephant Strategy		09 07 2022
Mailing Address 25475 Marsh Landing Pkwy		Amount
City State	Zip Code	13000.00
Ponte Vedra Beach FL	32082	Transaction ID : 007  Date of Disbursement or Obligation
Purpose of Expenditure Media Production	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 Sought:   House District: 02
Craig, Angela, , ,	<b>X</b> Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	662344.31	Disbursement For:  Primary  ■ General   2022  Other (specify)  ■
Full Name of Payee		Date of Public Distribution/Dissemination
Red Elephant Strategy		09 07 2022
Mailing Address 25475 Marsh Landing Pkwy		Amount
City State	Zip Code	10000.00
Ponte Vedra Beach FL	32082	Transaction ID : 008  Date of Disbursement or Obligation
Purpose of Expenditure Media Production	Category/ Type 004	09 / 07 / 2022
Name of Federal Candidate	<b>x</b> Support	Office Sought:   House District: 02
Kistner, Tyler, , ,	Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	672344.31	Disbursement For:  Primary  General 2022  Gher (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		23000.00
(a, colling of nonized mosperident Experiance		23000:00
(b) SUBTOTAL of Unitemized Independent Expenditures		·
(c) TOTAL Independent Expenditures		672344.31
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.		
	onically Filed] Date	09
Signature		