## 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 Progressive Caucus PAC	
	C C00513176
Check if 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Deliver Strategies LLC	M = M / D = D / Y = Y = Y
Mailing Address PO Box 100970	06 15 2020 Amount
City State Zip Code	20823.60
Arlington VA 22210-3970	Transaction ID: VQZ94AM9DZ8 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate  Category/ Type  004	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: X House District:17
JONES, MONDAIRE, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought  Disbt 2020	ursement For:   ✓ Primary General  Other (specify)  ✓
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	ursement For: Primary General
Per Election for Office Sought	Other (specify)
<u> </u>	
(a) SUBTOTAL of Itemized Independent Expenditures	20823.60
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4
(c) TOTAL Independent Expenditures	20823.60
	4
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.	
Evans, Diane, , ,	M / D D / Y Y Y Y
[Electronically Filed] Date	06 2020
Signature	