24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Conservative Congress Now!	C C00591354
Check if 24-hour report X 48-hour report New report Amends report f	iled on Man / Dab / Yaryay
Full Name of Payee Public Concepts, LLC	Date of Public Distribution/Dissemination
	07 21 2016
Mailing Address 5730 Corporate Way	Amount
Suite 214	
City State Zip Code	10980.00
West Palm Beach FL 33407	Transaction ID : SE.4135 Date of Disbursement or Obligation
Purpose of Expenditure direct mail services Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support O	ffice Sought: House District: 18
Rebecca Negron Oppose	President Senate State: FL
	isbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
	Data of Dishurament or Obligation
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
Name of Foderal Condidate	
Support	Iffice Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	isbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	10980.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expanditures	
(c) TOTAL Independent Expenditures	10980.00
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Nancy H. Watkins	M = M / D = D / Y = Y = Y
Signature [Electronically Filed] Date	07 21 2016
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