## 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 ▼
Conservative Congress Now!	
	C C00591354
Check if 24-hour report X 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Public Concepts, LLC	08 02 2016
Mailing Address 5730 Corporate Way	00 02 2010
Suite 214	Amount
City State Zip Code	10980.00
West Palm Beach FL 33407	Transaction ID : SE.4176  Date of Disbursement or Obligation
Purpose of Expenditure direct mail services  Category/ Type	M   M
Name of Federal Candidate Support Office	e Sought: X House District: 18
Rebecca Negron Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	ursement For: X 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	
	Data ( Dishara was to a Obligation
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Office	ee Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Dist	oursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) CURTOTAL of howined Independent Funerality as	
(a) SUBTOTAL of Itemized Independent Expenditures	10980.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
/ ·	
(c) TOTAL Independent Expenditures	10980.00
Under penalty of perjury I certify that the independent expenditures reported herein were not me 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.	· · · · · · · · · · · · · · · · · · ·
Nancy H. Watkins	-M / D D / Y - Y - Y
CT71	08 03 2016
oignature	