

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) UnidosUS Action PAC			FEC IDENTIFICATION NUMBER ▼ C C00684258		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name of Payee GetThru			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 03 / 2024		
Mailing Address 1330 Broadway FI 3			Amount 1612.24		
City Oakland		State CA	Zip Code 94612-2503		
Purpose of Expenditure GOTV Calls		Category/ Type 001		Transaction ID : 500081282 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y	
Name of Federal Candidate HARRIS, KAMALA, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought 271424.28			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee The Chavez Group			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Y Y 11 / 02 / 2024		
Mailing Address 99 Neponset Ave			Amount 2423.70		
City Boston		State MA	Zip Code 02136-3916		
Purpose of Expenditure GOTV Canvass and Phone Banking Support		Category/ Type 001		Transaction ID : 500081281 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y	
Name of Federal Candidate HARRIS, KAMALA, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: <u>US</u>
Calendar Year-To-Date Per Election for Office Sought 271424.28			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			4035.94		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			4035.94		
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.					
Signature Diaz, Lautaro, , ,			Date M M M / D D D / Y Y Y Y Y Y Y Y 04 / 15 / 2025		