

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

BOLD America

ADDRESS (number and street)

PO Box 15845

Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00854299

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☒ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2026

through

M M M / D D D / Y Y Y Y Y Y  
07 31 2026

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Koob, Christopher, , ,

Signature of Treasurer

Koob, Christopher, , ,

Date

M M M / D D D / Y Y Y Y Y Y  
08 20 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**BOLD America**

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2026

To:

MM / DD / YYYY  
07 / 31 / 2026

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, 2026                                                                           |                         | 487105.19                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | 914610.21               |                                   |
| (c) Total Receipts (from Line 19) .....                                                                          | 2560000.00              | 7575590.76                        |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 3474610.21              | 8062695.95                        |
| 7. Total Disbursements (from Line 31) .....                                                                      | 3462603.57              | 8050689.31                        |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 12006.64                | 12006.64                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**BOLD America**

Report Covering the Period:

From:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 01  | / | 2026    |

To:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 31  | / | 2026    |

| I. Receipts                                                                                           | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                            |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                               |                               |                                   |
| (i) Itemized (use Schedule A).....                                                                    | 1535000.00                    | 3255000.00                        |
| (ii) Unitemized .....                                                                                 | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶                                                       | 1535000.00                    | 3255000.00                        |
| (b) Political Party Committees .....                                                                  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                                    | 875000.00                     | 2835000.00                        |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 2410000.00                    | 6090000.00                        |
| 12. Transfers From Affiliated/Other Party Committees.....                                             | 150000.00                     | 1475000.00                        |
| 13. All Loans Received .....                                                                          | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....                                                                     | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 10451.60                          |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....                                           | 0.00                          | 139.16                            |
| 18. Transfers from Non-Federal and Levin Funds                                                        |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....                                                      | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....                                                              | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..                                                           | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                         | 2560000.00                    | 7575590.76                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                   | 2560000.00                    | 7575590.76                        |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....                                                                    | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....                                                 | 7025.50                       | 39346.60                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 7025.50                       | 39346.60                          |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 10000.00                          |
| 24. Independent Expenditures (use Schedule E) .....                                            | 3455578.07                    | 8001342.71                        |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:                                                               |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....                                                           | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                             | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))                                          |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....                                                                        | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 3462603.57                    | 8050689.31                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 3462603.57                    | 8050689.31                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/<br>Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 2410000.00                    | 6090000.00                        |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 2410000.00                    | 6090000.00                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 7025.50                       | 39346.60                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 10451.60                          |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 7025.50                       | 28895.00                          |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 22

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**BOLD America**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sarofim, Susan, , ,**

Mailing Address PO Box 27129

City  
HoustonState  
TXZip Code  
77227-7129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self EmployedOccupation (for Individual)  
Philanthropist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 10 / 2026

Transaction ID : 11548023

Amount of Each Receipt this Period

35000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Proximo Action**Mailing Address 1032 15th St NW  
Ste 247City  
WashingtonState  
DCZip Code  
20005-1502FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2945000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2026

Transaction ID : 11599315

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Proximo Action**Mailing Address 1032 15th St NW  
Ste 247City  
WashingtonState  
DCZip Code  
20005-1502FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2945000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2026

Transaction ID : 11482609

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1535000.00

1535000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 22

(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**BOLD America**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CHC BOLD PAC**

Mailing Address 3723 Greenville Ave  
Pmb 41

City  
Dallas

State  
TX

Zip Code  
75206-5311

FEC ID number of contributing  
federal political committee.

**C**

C00365536

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 16    |   | 2026        |

**Transaction ID : 11599322**

Amount of Each Receipt this Period

250000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. United Democracy Project ('UDP')**

Mailing Address 712 H St NE  
Ste 2691

City

Washington

State

DC

Zip Code

20002-3627

FEC ID number of contributing  
federal political committee.

**C**

C00799031

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2150000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 21    |   | 2026        |

**Transaction ID : 11599314**

Amount of Each Receipt this Period

600000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. International Association of Sheet Metal, Air, Rail and Transportation Political Action League**

Mailing Address 1750 New York Ave NW  
Ste 600

City

Washington

State

DC

Zip Code

20006-5301

FEC ID number of contributing  
federal political committee.

**C**

C00007542

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 30    |   | 2026        |

**Transaction ID : 11690638**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

875000.00

TOTAL This Period (last page this line number only)..... ►

875000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 22

(check only one)

|                              |                              |                              |                                        |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|----------------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

**BOLD America**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Democrats 2026**

Mailing Address PO Box 15845

City  
WashingtonState  
DCZip Code  
20003-0845FEC ID number of contributing  
federal political committee.

C C00897173

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 27    |   | 2026        |

**Transaction ID : 11629812**

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Transfer from Affiliated Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Democrats 2026**

Mailing Address PO Box 15845

City  
WashingtonState  
DCZip Code  
20003-0845FEC ID number of contributing  
federal political committee.

C C00897173

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 16    |   | 2026        |

**Transaction ID : 11550964**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Transfer from Affiliated Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150000.00

150000.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 22

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**BOLD America**

Full Name (Last, First, Middle Initial)

**A. MBA Consulting Group**

Mailing Address PO Box 15845

City  
Washington

State  
DC

Zip Code  
20003-0845

Purpose of Disbursement

Compliance Services

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2026

FEC Identification Number

**C**

**Transaction ID : 500343442**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sandler Reiff Lamb Rosenstein & Birkenstock, P.C.**

Mailing Address 1090 Vermont Ave NW  
Ste 750

City  
Washington

State  
DC

Zip Code  
20005-4970

Purpose of Disbursement

Legal Services

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 17 / 2026

FEC Identification Number

**C**

**Transaction ID : 500339742**

Amount of Each Disbursement this Period

1725.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Nielsen Consulting LLC**

Mailing Address 621 11th St NE

City  
Washington

State  
DC

Zip Code  
20002-5317

Purpose of Disbursement

Research

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 01 / 2026

FEC Identification Number

**C**

**Transaction ID : 500334713**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6725.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 22

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**BOLD America**

Full Name (Last, First, Middle Initial)

## **A. Amalgamated Bank**

Mailing Address 1825 K St NW

City  
Washington

State  
DC

Zip Code  
20006-1202

Purpose of Disbursement

Bank Fee

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 29 / 2026

FEC Identification Number

C

**Transaction ID : 500343267**

Amount of Each Disbursement this Period

300.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.50

7025.50

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 11 OF 22  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |                                                                                                     |                                                                                                                                                                                                       |                                                                                                                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                                                                     | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                                             |                                                                                                                                                             |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |                                                                                                     |                                                                                                                                                                                                       |                                                                                                                                                             |
| Full Name of Payee<br>Viewpoint Media LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |             |                                                                                                     | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>07 / 24 / 2026                               |                                                                                                                                                             |
| Mailing Address    2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">50000.00</div>                                                                                                   |                                                                                                                                                             |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | State<br>CA | Zip Code<br>94704-1210                                                                              | <b>Transaction ID : 500342470</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>07 / 24 / 2026 |                                                                                                                                                             |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |                                                                                                                                                                                                       |                                                                                                                                                             |
| Name of Federal Candidate:<br>HERNANDEZ, MELISSA, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                                                                                                     | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                        | Office Sought: <input checked="" type="checkbox"/> House    District: 14<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1485524.81</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                                                                                                     | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input checked="" type="checkbox"/> Other (specify) ▶    Run-off Special                                  |                                                                                                                                                             |
| Full Name of Payee<br>Viewpoint Media LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |             |                                                                                                     | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>07 / 17 / 2026                               |                                                                                                                                                             |
| Mailing Address    2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">99600.00</div>                                                                                                   |                                                                                                                                                             |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | State<br>CA | Zip Code<br>94704-1210                                                                              | <b>Transaction ID : 500340631</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>07 / 16 / 2026 |                                                                                                                                                             |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |                                                                                                                                                                                                       |                                                                                                                                                             |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |                                                                                                     | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                                                                        | Office Sought: <input checked="" type="checkbox"/> House    District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: AZ |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input type="checkbox"/> Other (specify) ▶                                                     |                                                                                                                                                             |
| <div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">149600.00</div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures .....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> |             |                                                                                                     |                                                                                                                                                                                                       |                                                                                                                                                             |
| 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<br><u>Koob, Christopher, , ,</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                                                                                                     | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>08 / 20 / 2026                                                                       |                                                                                                                                                             |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                 |                                                                                                                                                       |                                                                                                                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                          |             |                                                                                 |                                                                                                                                                       | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00854299                                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>                                                              |             |                                                                                 |                                                                                                                                                       |                                                                                                                                                                   |  |
| Full Name of Payee<br>Sena Kozar Strategies <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                           |             |                                                                                 | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>07 / 21 / 2026    |                                                                                                                                                                   |  |
| Mailing Address 3723 Jenifer St NW                                                                                                                                                                                                                                                                                                                          |             |                                                                                 | Amount<br><span style="border: 1px solid black; padding: 2px;">15936.81</span>                                                                        |                                                                                                                                                                   |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20015-1805                                                          | Transaction ID : 500341891                                                                                                                            |                                                                                                                                                                   |  |
| Purpose of Expenditure<br>Advertising Production                                                                                                                                                                                                                                                                                                            |             | Category/<br>Type <span style="border: 1px solid black; padding: 2px;"> </span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>07 / 21 / 2026           |                                                                                                                                                                   |  |
| Name of Federal Candidate:<br>HERNANDEZ, MELISSA, , ,                                                                                                                                                                                                                                                                                                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  | Office Sought: <input checked="" type="checkbox"/> House District: 14<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA |                                                                                                                                                                   |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <span style="border: 1px solid black; padding: 2px;">1485524.81</span>          |                                                                                                                                                       | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                             |             |                                                                                 | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>07 / 17 / 2026    |                                                                                                                                                                   |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                           |             |                                                                                 | Amount<br><span style="border: 1px solid black; padding: 2px;">192000.00</span>                                                                       |                                                                                                                                                                   |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                            | State<br>CA | Zip Code<br>94704-1210                                                          | Transaction ID : 500340632                                                                                                                            |                                                                                                                                                                   |  |
| Purpose of Expenditure<br>TV Buy                                                                                                                                                                                                                                                                                                                            |             | Category/<br>Type <span style="border: 1px solid black; padding: 2px;"> </span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>07 / 16 / 2026           |                                                                                                                                                                   |  |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., ,                                                                                                                                                                                                                                                                                                           |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose  | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ |                                                                                                                                                                   |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <span style="border: 1px solid black; padding: 2px;">1970053.26</span>          |                                                                                                                                                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input type="checkbox"/> Other (specify) ▶                 |  |
| (a) SUBTOTAL of Itemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                     |             |                                                                                 | <span style="border: 1px solid black; padding: 2px;">207936.81</span>                                                                                 |                                                                                                                                                                   |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                    |             |                                                                                 | <span style="border: 1px solid black; padding: 2px;"> </span>                                                                                         |                                                                                                                                                                   |  |
| (c) TOTAL Independent Expenditures .....                                                                                                                                                                                                                                                                                                                    |             |                                                                                 | <span style="border: 1px solid black; padding: 2px;"> </span>                                                                                         |                                                                                                                                                                   |  |
| 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<br><u>Koob, Christopher, , ,</u>                                                                                                                                                                                                                                                                                                                  |             |                                                                                 | Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span><br>08 / 20 / 2026                                            |                                                                                                                                                                   |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 13 OF 22  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                                     |                                                                                                                                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                          |             |                                                                                                     | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                                                                                          |             |                                                                                                     |                                                                                                                                                                            |  |
| Full Name of Payee<br>Sena Kozar Strategies <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                           |             |                                                                                                     | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                               |  |
| Mailing Address 3723 Jenifer St NW                                                                                                                                                                                                                                                                                                                          |             |                                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">10326.16</div>                                                                        |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20015-1805                                                                              | <b>Transaction ID : 500338313</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> |  |
| Purpose of Expenditure<br>Advertising Production                                                                                                                                                                                                                                                                                                            |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |                                                                                                                                                                            |  |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., , <span style="float: right;"><input type="checkbox"/> Support<br/><input checked="" type="checkbox"/> Oppose</span>                                                                                                                                                                                        |             |                                                                                                     | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ                      |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                         |             |                                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                               |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                             |             |                                                                                                     | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                               |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                           |             |                                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">66400.00</div>                                                                        |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                            | State<br>CA | Zip Code<br>94704-1210                                                                              | <b>Transaction ID : 500340633</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> |  |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                       |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |                                                                                                                                                                            |  |
| Name of Federal Candidate:<br>GALAN-WOODS, MARLENE, , , <span style="float: right;"><input checked="" type="checkbox"/> Support<br/><input type="checkbox"/> Oppose</span>                                                                                                                                                                                  |             |                                                                                                     | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ                      |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                         |             |                                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                               |  |
| (a) SUBTOTAL of Itemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                     |             |                                                                                                     | <div style="border: 1px solid black; padding: 2px; display: inline-block;">76726.16</div>                                                                                  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                    |             |                                                                                                     | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                          |  |
| (c) TOTAL Independent Expenditures .....                                                                                                                                                                                                                                                                                                                    |             |                                                                                                     | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                          |  |
| 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<br><u>Koob, Christopher, , ,</u>                                                                                                                                                                                                                                                                                                                  |             |                                                                                                     | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                                                                       |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 14 OF 22  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                        | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                                                                                                                                                                                                                                                                                                                              |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                        | Date of Public Distribution/Dissemination<br><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>07</div><div>24</div><div>2026</div></div>                               |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |             |                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">37500.00</div>                                                                                                                                                                                                                                                                                                                                                                                    |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | State<br>CA | Zip Code<br>94704-1210 | <b>Transaction ID : 500342473</b><br>Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>07</div><div>24</div><div>2026</div></div> |  |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |                        | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                                                                                                                                                                                    |  |
| Name of Federal Candidate:<br>WAHAB, AISHA, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                        | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>District: 14 State: CA                                                                                                                                                                                                                                                   |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1485524.81</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |             |                        | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special                                                                                                                                                                                                                                                                                                                      |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                        | Date of Public Distribution/Dissemination<br><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>07</div><div>17</div><div>2026</div></div>                               |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |             |                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">128000.00</div>                                                                                                                                                                                                                                                                                                                                                                                   |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | State<br>CA | Zip Code<br>94704-1210 | <b>Transaction ID : 500340634</b><br>Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>07</div><div>16</div><div>2026</div></div> |  |
| Purpose of Expenditure<br>TV Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             |                        | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                                                                                                                                                                                    |  |
| Name of Federal Candidate:<br>GALAN-WOODS, MARLENE, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |                        | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>District: 01 State: AZ                                                                                                                                                                                                                                                   |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |             |                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                                                                                                                                                                      |  |
| <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">165500.00</div></div></div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures .....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div>                                                                    |             |                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| 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.<br><br><div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 40%;">Signature<br/><u>Koob, Christopher, , ,</u></div><div style="width: 20%; text-align: center;">Date</div><div style="width: 40%; text-align: center;"><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div><div style="display: flex; justify-content: space-between; width: 100%;"><div>08</div><div>20</div><div>2026</div></div></div></div> |             |                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 15 OF 22  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                                     |                                                                                                                                                                                                       |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                          |             |                                                                                                     | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                                             |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>                                                                                                             |             |                                                                                                     |                                                                                                                                                                                                       |  |
| Full Name of Payee<br>Viewpoint Media LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                |             |                                                                                                     | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>07 / 24 / 2026                               |  |
| Mailing Address    2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                        |             |                                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">12500.00</div>                                                                                                   |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                            | State<br>CA | Zip Code<br>94704-1210                                                                              | <b>Transaction ID : 500342474</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>07 / 24 / 2026 |  |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                       |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |                                                                                                                                                                                                       |  |
| Name of Federal Candidate:<br>HERNANDEZ, MELISSA, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                           |             |                                                                                                     | Office Sought: <input checked="" type="checkbox"/> House    District: 14<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA                                           |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1485524.81</div>                                                                                                                                                                                                         |             |                                                                                                     | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input checked="" type="checkbox"/> Other (specify) ▶    Run-off Special                                  |  |
| Full Name of Payee<br>Viewpoint Media LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                |             |                                                                                                     | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>07 / 17 / 2026                               |  |
| Mailing Address    2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                        |             |                                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">5600.00</div>                                                                                                    |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                            | State<br>CA | Zip Code<br>94704-1210                                                                              | <b>Transaction ID : 500340635</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>07 / 16 / 2026 |  |
| Purpose of Expenditure<br>Ad Production                                                                                                                                                                                                                                                                                                                     |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |                                                                                                                                                                                                       |  |
| Name of Federal Candidate:<br>GALAN-WOODS, MARLENE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                         |             |                                                                                                     | Office Sought: <input checked="" type="checkbox"/> House    District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: AZ                                           |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                         |             |                                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input type="checkbox"/> Other (specify) ▶                                                     |  |
| (a) SUBTOTAL of Itemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                     |             |                                                                                                     | <div style="border: 1px solid black; padding: 2px; display: inline-block;">18100.00</div>                                                                                                             |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                    |             |                                                                                                     | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                     |  |
| (c) TOTAL Independent Expenditures .....                                                                                                                                                                                                                                                                                                                    |             |                                                                                                     | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                     |  |
| 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<br><u>Koob, Christopher, , ,</u>                                                                                                                                                                                                                                                                                                                  |             |                                                                                                     | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div><br>08 / 20 / 2026                                                                       |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 16 OF 22  
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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                                                                     | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                                    |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>New report</b> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |                                                                                                     |                                                                                                                                                                                              |  |
| Full Name of Payee<br>Targeted Platform Media, LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                                                                                                     | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>07 / 21 / 2026                               |  |
| Mailing Address<br>PO Box 237                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |                                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">628294.00</div>                                                                                         |  |
| City<br>Crownsville                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | State<br>MD | Zip Code<br>21032-0237                                                                              | <b>Transaction ID : 500341685</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>07 / 21 / 2026 |  |
| Purpose of Expenditure<br>TV Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |                                                                                                                                                                                              |  |
| Name of Federal Candidate:<br>HERNANDEZ, MELISSA, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |                                                                                                     | Office Sought: <input checked="" type="checkbox"/> House    District: 14<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA                                  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1485524.81</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                                                                                                     | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input checked="" type="checkbox"/> Other (specify) ▶    Run-off Special                         |  |
| Full Name of Payee<br>Viewpoint Media LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |             |                                                                                                     | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>07 / 17 / 2026                               |  |
| Mailing Address<br>2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                                                     | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">8400.00</div>                                                                                           |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | State<br>CA | Zip Code<br>94704-1210                                                                              | <b>Transaction ID : 500340636</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>07 / 16 / 2026 |  |
| Purpose of Expenditure<br>Ad Production                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |                                                                                                                                                                                              |  |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |                                                                                                     | Office Sought: <input checked="" type="checkbox"/> House    District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: AZ                                  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input type="checkbox"/> Other (specify) ▶                                            |  |
| <div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">636694.00</div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures .....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> |             |                                                                                                     |                                                                                                                                                                                              |  |
| 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<br><u>Koob, Christopher, , ,</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                                                                                                     | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>08 / 20 / 2026                                                                       |  |



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                          |             |                                                                             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00854299                                                                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report                                                                                                                                                                                                                                                                    |             |                                                                             | New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>                                                                                      |  |
| Full Name of Payee<br>Targeted Platform Media, LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                       |             |                                                                             | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>07 / 28 / 2026                                                         |  |
| Mailing Address PO Box 237                                                                                                                                                                                                                                                                                                                                  |             |                                                                             | Amount<br><span style="border: 1px solid black; padding: 2px;">157073.50</span>                                                                                                                   |  |
| City<br>Crownsville                                                                                                                                                                                                                                                                                                                                         | State<br>MD | Zip Code<br>21032-0237                                                      | Transaction ID : 500342746                                                                                                                                                                        |  |
| Purpose of Expenditure<br>TV Buy                                                                                                                                                                                                                                                                                                                            |             | Category/Type <span style="border: 1px solid black; padding: 2px;"> </span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>07 / 27 / 2026                                                                |  |
| Name of Federal Candidate:<br>HERNANDEZ, MELISSA, , ,                                                                                                                                                                                                                                                                                                       |             |                                                                             | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate<br>District: 14 State: CA |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1485524.81</span>                                                                                                                                                                                                                              |             |                                                                             | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special                                 |  |
| Full Name of Payee<br>Viewpoint Media LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                |             |                                                                             | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>07 / 08 / 2026                                                         |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                           |             |                                                                             | Amount<br><span style="border: 1px solid black; padding: 2px;">50000.00</span>                                                                                                                    |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                            | State<br>CA | Zip Code<br>94704-1210                                                      | Transaction ID : 500337376                                                                                                                                                                        |  |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                       |             | Category/Type <span style="border: 1px solid black; padding: 2px;"> </span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>07 / 07 / 2026                                                                |  |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., ,                                                                                                                                                                                                                                                                                                           |             |                                                                             | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate<br>District: 01 State: AZ |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1970053.26</span>                                                                                                                                                                                                                              |             |                                                                             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input type="checkbox"/> Other (specify) ▶                                                 |  |
| (a) SUBTOTAL of Itemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                     |             |                                                                             | <span style="border: 1px solid black; padding: 2px;">207073.50</span>                                                                                                                             |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                    |             |                                                                             | <span style="border: 1px solid black; padding: 2px;"> </span>                                                                                                                                     |  |
| (c) TOTAL Independent Expenditures .....                                                                                                                                                                                                                                                                                                                    |             |                                                                             | <span style="border: 1px solid black; padding: 2px;"> </span>                                                                                                                                     |  |
| 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<br><u>Koob, Christopher, , ,</u>                                                                                                                                                                                                                                                                                                                  |             |                                                                             | Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>08 / 20 / 2026                                                                                                 |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 18 OF 22  
FOR LINE 24 OF FORM 3X

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                          |             | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                                                                                           |                                                                                                                                       |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report                                                                                                                                                                                                                                                                    |             | New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>                                                                                          |                                                                                                                                       |
| Full Name of Payee<br>Viewpoint Media LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                |             | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">25000.00</div> |                                                                                                                                       |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                           |             | Transaction ID : 500340686                                                                                                                                                                                                                          |                                                                                                                                       |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                            | State<br>CA | Zip Code<br>94704-1210                                                                                                                                                                                                                              | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                       |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                 |                                                                                                                                       |
| Name of Federal Candidate:<br>GALAN-WOODS, MARLENE, , ,                                                                                                                                                                                                                                                                                                     |             | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ<br><input type="checkbox"/> Oppose                                                            |                                                                                                                                       |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                         |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                                                                                        |                                                                                                                                       |
| Full Name of Payee<br>Viewpoint Media LLC <input type="checkbox"/> Memo Item                                                                                                                                                                                                                                                                                |             | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">75000.00</div> |                                                                                                                                       |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                           |             | Transaction ID : 500339807                                                                                                                                                                                                                          |                                                                                                                                       |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                            | State<br>CA | Zip Code<br>94704-1210                                                                                                                                                                                                                              | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                       |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                 |                                                                                                                                       |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., ,                                                                                                                                                                                                                                                                                                           |             | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ<br><input checked="" type="checkbox"/> Oppose                                                 |                                                                                                                                       |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                         |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                                                                                        |                                                                                                                                       |
| (a) SUBTOTAL of Itemized Independent Expenditures ..... ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">100000.00</div>                                                                                                                                                                                                        |             |                                                                                                                                                                                                                                                     |                                                                                                                                       |
| (b) SUBTOTAL of Unitemized Independent Expenditures..... ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                |             |                                                                                                                                                                                                                                                     |                                                                                                                                       |
| (c) TOTAL Independent Expenditures ..... ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                                |             |                                                                                                                                                                                                                                                     |                                                                                                                                       |
| 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<br><br>Koob, Christopher, , ,                                                                                                                                                                                                                                                                                                                     |             | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div><br>08 / 20 / 2026                                                                                                                              |                                                                                                                                       |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 19 OF 22  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                                                                                                                                                                                                                                                                                             |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  | Date of Public Distribution/Dissemination<br><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div>07</div><div>08</div><div>2026</div></div>                        |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">442363.55</div>                                                                                                                                                                                                                                                                                                                                                  |  |
| City State Zip Code<br>Berkeley CA 94704-1210                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>TV Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  | Transaction ID : 500337817<br>Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div>07</div><div>07</div><div>2026</div></div> |  |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., , <span style="float: right;"><input type="checkbox"/> Support<br/><input checked="" type="checkbox"/> Oppose</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ                                                                                                                                                                                                                                                                                                 |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                                                                                                                                          |  |
| Full Name of Payee<br>Targeted Platform Media, LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  | Date of Public Distribution/Dissemination<br><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div>07</div><div>28</div><div>2026</div></div>                        |  |
| Mailing Address PO Box 237                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">471220.50</div>                                                                                                                                                                                                                                                                                                                                                  |  |
| City State Zip Code<br>Crownsville MD 21032-0237                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>TV Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  | Transaction ID : 500342747<br>Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div>07</div><div>27</div><div>2026</div></div> |  |
| Name of Federal Candidate:<br>WAHAB, AISHA, , , <span style="float: right;"><input type="checkbox"/> Support<br/><input checked="" type="checkbox"/> Oppose</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  | Office Sought: <input checked="" type="checkbox"/> House District: 14<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA                                                                                                                                                                                                                                                                                                 |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1485524.81</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special                                                                                                                                                                                                                                                                                          |  |
| <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">913584.05</div></div></div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures .....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div>                                          |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| 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.<br><br><div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="width: 40%;">Signature<br/><u>Koob, Christopher, , ,</u></div><div style="width: 20%; text-align: center;">Date</div><div style="width: 40%; text-align: center;"><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div><div style="display: flex; justify-content: space-between;"><div>08</div><div>20</div><div>2026</div></div></div></div> |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 20 OF 22  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                        | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> |             |                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                                                                                                                                                  |             |                        | Date of Public Distribution/Dissemination<br><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">07</div><div style="border: 1px solid black; padding: 2px;">22</div><div style="border: 1px solid black; padding: 2px;">2026</div></div>                               |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">100000.00</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State<br>CA | Zip Code<br>94704-1210 | <b>Transaction ID : 500341957</b><br>Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">07</div><div style="border: 1px solid black; padding: 2px;">22</div><div style="border: 1px solid black; padding: 2px;">2026</div></div> |  |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                        | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| Name of Federal Candidate:<br>HERNANDEZ, MELISSA, , ,                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                        | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>District: 14 State: CA                                                                                                                                                                                                                                                                                                                                                                      |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1485524.81</div>                                                                                                                                                                                                                                                                                                                              |             |                        | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                                                                                                                                                  |             |                        | Date of Public Distribution/Dissemination<br><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">07</div><div style="border: 1px solid black; padding: 2px;">08</div><div style="border: 1px solid black; padding: 2px;">2026</div></div>                               |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">50000.00</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State<br>CA | Zip Code<br>94704-1210 | <b>Transaction ID : 500337377</b><br>Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">07</div><div style="border: 1px solid black; padding: 2px;">07</div><div style="border: 1px solid black; padding: 2px;">2026</div></div> |  |
| Purpose of Expenditure<br>Digital Buy                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                        | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., ,                                                                                                                                                                                                                                                                                                                                                                                                                                |             |                        | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>District: 01 State: AZ                                                                                                                                                                                                                                                                                                                                                                      |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                                                                                                                                              |             |                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2026 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |
| (a) SUBTOTAL of Itemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                                                                                                                                          |             |                        | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">150000.00</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                              |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                        | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;"> </div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| (c) TOTAL Independent Expenditures .....                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                        | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;"> </div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| 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<br><u>Koob, Christopher, , ,</u>                                                                                                                                                                                                                                                                                                                                                                                                                                       |             |                        | Date <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">M M M</div><div style="border: 1px solid black; padding: 2px;">D D D</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; padding: 2px;">08</div><div style="border: 1px solid black; padding: 2px;">20</div><div style="border: 1px solid black; padding: 2px;">2026</div></div>                                                                       |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 21 OF 22  
FOR LINE 24 OF FORM 3X

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                        | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00854299</div>                                                                                                                                                                                                                                                                                                                                              |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> |             |                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                                                                                                                                                               |             |                        | Date of Public Distribution/Dissemination<br><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>07</div><div>14</div><div>2026</div></div>                               |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">375000.00</div>                                                                                                                                                                                                                                                                                                                                                                                   |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | State<br>CA | Zip Code<br>94704-1210 | <b>Transaction ID : 500339808</b><br>Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>07</div><div>14</div><div>2026</div></div> |  |
| Purpose of Expenditure<br>TV Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                        | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                                                                                                                                                                                    |  |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., , <span style="float: right;"><input type="checkbox"/> Support<br/><input checked="" type="checkbox"/> Oppose</span>                                                                                                                                                                                                                                                                                                                          |             |                        | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ                                                                                                                                                                                                                                                                                                                                  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                                                                                                                                                           |             |                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                                                                                                                                                                           |  |
| Full Name of Payee<br>Viewpoint Media LLC <span style="float: right;"><input type="checkbox"/> Memo Item</span>                                                                                                                                                                                                                                                                                                                                                                               |             |                        | Date of Public Distribution/Dissemination<br><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>07</div><div>08</div><div>2026</div></div>                               |  |
| Mailing Address 2140 Shattuck Ave                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">442363.55</div>                                                                                                                                                                                                                                                                                                                                                                                   |  |
| City<br>Berkeley                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | State<br>CA | Zip Code<br>94704-1210 | <b>Transaction ID : 500337818</b><br>Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>07</div><div>07</div><div>2026</div></div> |  |
| Purpose of Expenditure<br>TV Buy                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             |                        | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                                                                                                                                                                                    |  |
| Name of Federal Candidate:<br>SHAH, AMISH, DR., , <span style="float: right;"><input type="checkbox"/> Support<br/><input checked="" type="checkbox"/> Oppose</span>                                                                                                                                                                                                                                                                                                                          |             |                        | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ                                                                                                                                                                                                                                                                                                                                  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1970053.26</div>                                                                                                                                                                                                                                                                                                                                           |             |                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                                                                                                                                                                           |  |
| (a) SUBTOTAL of Itemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                                                                                                                                                       |             |                        | <div style="border: 1px solid black; padding: 2px; display: inline-block;">817363.55</div>                                                                                                                                                                                                                                                                                                                                                                                             |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |                        | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| (c) TOTAL Independent Expenditures .....                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             |                        | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| 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<br><u>Koob, Christopher, , ,</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |                        | Date <div style="display: flex; justify-content: space-between; width: 100%;"><div style="border: 1px solid black; padding: 2px;">M M /</div><div style="border: 1px solid black; padding: 2px;">D D /</div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div style="display: flex; justify-content: space-between; width: 100%;"><div>08</div><div>20</div><div>2026</div></div>                                                                       |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

|                        |    |    |    |
|------------------------|----|----|----|
| PAGE                   | 22 | OF | 22 |
| FOR LINE 24 OF FORM 3X |    |    |    |

|                                                                                          |   |                                                                                                                                                                                                                                                                                                                                                                                                                |   |   |   |  |  |  |  |   |   |  |  |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|------------------------------------------------------------------------------------------|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|--|--|--|--|---|---|--|--|--|--|---|---|---|---|---|---|--|--|--|--|--|--|
| NAME OF COMMITTEE (In Full)<br><b>BOLD America</b>                                       |   | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00854299                                                                                                                                                                                                                                                                                                                                                              |   |   |   |  |  |  |  |   |   |  |  |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report |   | New report Amends report filed on <table border="1"><tr><td>M</td><td>M</td><td></td></tr><tr><td></td><td></td><td></td></tr></table> / <table border="1"><tr><td>D</td><td>D</td><td></td></tr><tr><td></td><td></td><td></td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> |   | M | M |  |  |  |  | D | D |  |  |  |  | Y | Y | Y | Y | Y | Y |  |  |  |  |  |  |
| M                                                                                        | M |                                                                                                                                                                                                                                                                                                                                                                                                                |   |   |   |  |  |  |  |   |   |  |  |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                          |   |                                                                                                                                                                                                                                                                                                                                                                                                                |   |   |   |  |  |  |  |   |   |  |  |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| D                                                                                        | D |                                                                                                                                                                                                                                                                                                                                                                                                                |   |   |   |  |  |  |  |   |   |  |  |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                          |   |                                                                                                                                                                                                                                                                                                                                                                                                                |   |   |   |  |  |  |  |   |   |  |  |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Y                                                                                        | Y | Y                                                                                                                                                                                                                                                                                                                                                                                                              | Y | Y | Y |  |  |  |  |   |   |  |  |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                          |   |                                                                                                                                                                                                                                                                                                                                                                                                                |   |   |   |  |  |  |  |   |   |  |  |  |  |   |   |   |   |   |   |  |  |  |  |  |  |

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---|---|--|----|--|--|---|---|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|---|---|---|----|---|---|---|---|--|----|--|--|---|---|---|---|---|---|--|--|--|--|--|--|
| Full Name of Payee<br>Sena Kozar Strategies                                                                                                                  |             |                                                                                                                                                                            | <input type="checkbox"/> Memo Item                                                                                                                                        | Date of Public Distribution/Dissemination<br><table border="1"><tr><td>M</td><td>M</td><td></td></tr><tr><td>07</td><td></td><td></td></tr></table> / <table border="1"><tr><td>D</td><td>D</td><td></td></tr><tr><td>28</td><td></td><td></td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 2026 |            | M | M |  | 07 |  |  | D | D |  | 28                                                                                                                                                                                                                                                                                                                                                                                                                          |  |            | Y | Y | Y | Y  | Y | Y |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| M                                                                                                                                                            | M           |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| 07                                                                                                                                                           |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| D                                                                                                                                                            | D           |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| 28                                                                                                                                                           |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Y                                                                                                                                                            | Y           | Y                                                                                                                                                                          | Y                                                                                                                                                                         | Y                                                                                                                                                                                                                                                                                                                                                                                                                                  | Y          |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Mailing Address 3723 Jenifer St NW                                                                                                                           |             |                                                                                                                                                                            | Amount<br><table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td>9750.00</td></tr></table> |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 9750.00    |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    | 9750.00    |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| City<br>Washington                                                                                                                                           | State<br>DC | Zip Code<br>20015-1805                                                                                                                                                     | Transaction ID : 500343078                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Purpose of Expenditure<br>Advertising Production                                                                                                             |             | Category/<br>Type <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  | Date of Disbursement or Obligation<br><table border="1"><tr><td>M</td><td>M</td><td></td></tr><tr><td>07</td><td></td><td></td></tr></table> / <table border="1"><tr><td>D</td><td>D</td><td></td></tr><tr><td>27</td><td></td><td></td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 2026 |  |            | M | M |   | 07 |   |   | D | D |  | 27 |  |  | Y | Y | Y | Y | Y | Y |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| M                                                                                                                                                            | M           |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| 07                                                                                                                                                           |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| D                                                                                                                                                            | D           |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| 27                                                                                                                                                           |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Y                                                                                                                                                            | Y           | Y                                                                                                                                                                          | Y                                                                                                                                                                         | Y                                                                                                                                                                                                                                                                                                                                                                                                                                  | Y          |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Name of Federal Candidate:<br>WAHAB, AISHA, , ,                                                                                                              |             |                                                                                                                                                                            | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                                            | Office Sought: <input checked="" type="checkbox"/> House District: 14<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA                                                                                                                                                                                                                                                                              |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                      |             |                                                                                                                                                                            | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td>1485524.81</td></tr></table>        |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 1485524.81 |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    | 1485524.81 |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special |             |                                                                                                                                                                            | 2026                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---|---|--|----|--|--|---|---|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|---|---|---|----|---|---|---|---|--|----|--|--|---|---|---|---|---|---|--|--|--|--|--|--|
| Full Name of Payee<br>Sena Kozar Strategies                                                                                                                  |             |                                                                                                                                                                            | <input type="checkbox"/> Memo Item                                                                                                                                        | Date of Public Distribution/Dissemination<br><table border="1"><tr><td>M</td><td>M</td><td></td></tr><tr><td>07</td><td></td><td></td></tr></table> / <table border="1"><tr><td>D</td><td>D</td><td></td></tr><tr><td>28</td><td></td><td></td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 2026 |            | M | M |  | 07 |  |  | D | D |  | 28                                                                                                                                                                                                                                                                                                                                                                                                                          |  |            | Y | Y | Y | Y  | Y | Y |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| M                                                                                                                                                            | M           |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| 07                                                                                                                                                           |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| D                                                                                                                                                            | D           |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| 28                                                                                                                                                           |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Y                                                                                                                                                            | Y           | Y                                                                                                                                                                          | Y                                                                                                                                                                         | Y                                                                                                                                                                                                                                                                                                                                                                                                                                  | Y          |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Mailing Address 3723 Jenifer St NW                                                                                                                           |             |                                                                                                                                                                            | Amount<br><table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td>3250.00</td></tr></table> |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 3250.00    |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    | 3250.00    |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| City<br>Washington                                                                                                                                           | State<br>DC | Zip Code<br>20015-1805                                                                                                                                                     | Transaction ID : 500343079                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Purpose of Expenditure<br>Advertising Production                                                                                                             |             | Category/<br>Type <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  | Date of Disbursement or Obligation<br><table border="1"><tr><td>M</td><td>M</td><td></td></tr><tr><td>07</td><td></td><td></td></tr></table> / <table border="1"><tr><td>D</td><td>D</td><td></td></tr><tr><td>27</td><td></td><td></td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 2026 |  |            | M | M |   | 07 |   |   | D | D |  | 27 |  |  | Y | Y | Y | Y | Y | Y |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| M                                                                                                                                                            | M           |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| 07                                                                                                                                                           |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| D                                                                                                                                                            | D           |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| 27                                                                                                                                                           |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Y                                                                                                                                                            | Y           | Y                                                                                                                                                                          | Y                                                                                                                                                                         | Y                                                                                                                                                                                                                                                                                                                                                                                                                                  | Y          |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Name of Federal Candidate:<br>HERNANDEZ, MELISSA, , ,                                                                                                        |             |                                                                                                                                                                            | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                            | Office Sought: <input checked="" type="checkbox"/> House District: 14<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA                                                                                                                                                                                                                                                                              |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                      |             |                                                                                                                                                                            | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td>1485524.81</td></tr></table>        |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 1485524.81 |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
|                                                                                                                                                              |             |                                                                                                                                                                            |                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    | 1485524.81 |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▶ Run-off Special |             |                                                                                                                                                                            | 2026                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |   |   |  |    |  |  |   |   |  |                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            |   |   |   |    |   |   |   |   |  |    |  |  |   |   |   |   |   |   |  |  |  |  |  |  |

|                                                          |   |                                                                                                                                                                    |  |  |            |  |  |  |  |  |  |  |  |            |
|----------------------------------------------------------|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------------|--|--|--|--|--|--|--|--|------------|
| (a) SUBTOTAL of Itemized Independent Expenditures .....  | ▶ | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td>13000.00</td></tr></table>   |  |  |            |  |  |  |  |  |  |  |  | 13000.00   |
|                                                          |   |                                                                                                                                                                    |  |  |            |  |  |  |  |  |  |  |  |            |
|                                                          |   |                                                                                                                                                                    |  |  | 13000.00   |  |  |  |  |  |  |  |  |            |
| (b) SUBTOTAL of Unitemized Independent Expenditures..... | ▶ | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>           |  |  |            |  |  |  |  |  |  |  |  |            |
|                                                          |   |                                                                                                                                                                    |  |  |            |  |  |  |  |  |  |  |  |            |
|                                                          |   |                                                                                                                                                                    |  |  |            |  |  |  |  |  |  |  |  |            |
| (c) TOTAL Independent Expenditures .....                 | ▶ | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td>3455578.07</td></tr></table> |  |  |            |  |  |  |  |  |  |  |  | 3455578.07 |
|                                                          |   |                                                                                                                                                                    |  |  |            |  |  |  |  |  |  |  |  |            |
|                                                          |   |                                                                                                                                                                    |  |  | 3455578.07 |  |  |  |  |  |  |  |  |            |

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.

Koob, Christopher, , ,

Signature

Date

|    |   |  |    |   |  |   |   |   |   |   |      |
|----|---|--|----|---|--|---|---|---|---|---|------|
| M  | M |  | D  | D |  | Y | Y | Y | Y | Y | Y    |
| 08 |   |  | 20 |   |  |   |   |   |   |   | 2026 |