

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)**

| | | | |
|----------------------|---|----|---|
| PAGE | 1 | OF | 2 |
| FOR SE OF FORM 24/28 | | | |

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|---|--|--|---|--|--|
| NAME OF COMMITTEE (In Full) United We Can | | | FEC IDENTIFICATION NUMBER ▼ C C00523621 | | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | | <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y | | |
| Full Name of Payee Blue Dot Data Mailing Address 4540 N Ravenswood Ave Unit 7 City Chicago State IL Zip Code 60640-6923 | | | Date of Public Distribution/Dissemination <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 02 11 2026 | | |
| Purpose of Expenditure Estimated Cost - Direct Mail | | | Amount <input type="checkbox"/> 32550.00 | | |
| Category/Type 004 | | | Transaction ID : 500021425 | | |
| Name of Federal Candidate DRIVER, ANTHONY, , , JR. | | | Date of Disbursement or Obligation <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 02 11 2026 | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <input type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL | | |
| <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► | | |
| <input type="checkbox"/> 35439.93 | | | | | |
| Full Name of Payee Scale To Win Mailing Address 13742 Harper St | | | Date of Public Distribution/Dissemination <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 02 10 2026 | | |
| City Santa Ana State CA Zip Code 92703-1419 | | | Amount <input type="checkbox"/> 1000.00 | | |
| Purpose of Expenditure Estimated Cost - Text Messages | | | Transaction ID : 500021428 | | |
| Category/Type 004 | | | Date of Disbursement or Obligation <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 02 10 2026 | | |
| Name of Federal Candidate DRIVER, ANTHONY, , , JR. | | | <input type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL | | |
| Calendar Year-To-Date Per Election for Office Sought | | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► | | |
| <input type="checkbox"/> 35439.93 | | | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ► <input type="checkbox"/> 33550.00 | | | | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ► <input type="checkbox"/> | | | | | |
| (c) TOTAL Independent Expenditures..... ► <input type="checkbox"/> | | | | | |
| 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. | | | | | |
| Saenz, Rocio, , , | | | Date <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 02 13 2026 | | |
| Signature | | | | | |

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FOR SE OF FORM 24/48

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|---|--|--|--|--|
| NAME OF COMMITTEE (In Full) United We Can | | FEC IDENTIFICATION NUMBER ▼ C C00523621 | | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report → <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y <input type="checkbox"/> 02 / <input type="checkbox"/> 10 / <input type="checkbox"/> 2026 | | |
| Full Name of Payee VOTE REV PAC | | Date of Public Distribution/Dissemination <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y <input type="checkbox"/> 02 / <input type="checkbox"/> 10 / <input type="checkbox"/> 2026 | | |
| Mailing Address 600 Pennsylvania Ave SE Unit 15180 | | Amount <input type="checkbox"/> 1889.93 | | |
| City Washington State DC Zip Code 20003-7508 | | Transaction ID : 500021427 | | |
| Purpose of Expenditure Website Development Consulting & Hosting | | Category/Type <input type="checkbox"/> 004 | | |
| Name of Federal Candidate DRIVER, ANTHONY, , , JR. | | Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u> | | |
| Calendar Year-To-Date Per Election for Office Sought <input type="checkbox"/> 35439.93 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► | | |
| Full Name of Payee | | Date of Public Distribution/Dissemination <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y | | |
| Mailing Address | | Amount <input type="checkbox"/> | | |
| City State Zip Code | | Date of Disbursement or Obligation <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y | | |
| Purpose of Expenditure | | Category/Type <input type="checkbox"/> | | |
| Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | | |
| Calendar Year-To-Date Per Election for Office Sought <input type="checkbox"/> | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____ | | |
| <p>(a) SUBTOTAL of Itemized Independent Expenditures..... ► <input type="checkbox"/> 1889.93</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures ► <input type="checkbox"/></p> <p>(c) TOTAL Independent Expenditures..... ► <input type="checkbox"/> 35439.93</p> | | | | |
| 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 <u>Saenz, Rocio, ,</u> | | Date <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y <input type="checkbox"/> 02 / <input type="checkbox"/> 13 / <input type="checkbox"/> 2026 | | |