

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

NAME OF COMMITTEE (In Full) PROTECTING AMERICA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ C C00890608	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y				
Full Name of Payee PEERLY			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 25 / 2026 M M / D D / Y Y Y Y Y Y	
Mailing Address 400 NORTH PINE ISLAND ROAD SUITE 300			Amount 2224.32	
City PLANTATION State FL Zip Code 33324		Transaction ID : E-90 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2026 M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure MASS TEXT MESSAGING		Category/Type 004		
Name of Federal Candidate TALARICO, JAMES, , ,			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: TX ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 301848.62			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶	
Full Name of Payee DIGITAL ROOM LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 28 / 2026 M M / D D / Y Y Y Y Y Y	
Mailing Address PO BOX 738052			Amount 12413.64	
City DALLAS State TX Zip Code 75373		Transaction ID : E-92 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 28 / 2026 M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure MASS MAILER PRODUCTION AND POSTAGE		Category/Type 004		
Name of Federal Candidate TALARICO, JAMES, , ,			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: TX ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 301848.62			Disbursement For: ☐ Primary ☒ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			14637.96	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				
(c) TOTAL Independent Expenditures..... ▶			14637.96	
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>BOLES, JASON, D, ,</u>			Date M M / D D / Y Y Y Y Y Y 08 / 28 / 2026 M M / D D / Y Y Y Y Y Y	