

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CHC BOLD PAC			FEC IDENTIFICATION NUMBER ▼ C C00365536		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee K. Squared Media LLC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2024 M M M / D D D / Y Y Y Y Y Y		
Mailing Address PO Box 56276			Amount 122810.00		
City Chicago		State IL	Zip Code 60656-0242		Transaction ID : 500454556
Purpose of Expenditure Television Ad Buy - Estimate		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 20 / 2024 M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate FLORES, MAYRA, NOHEMI, ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 34 ☐ President ☐ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			220254.88 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
Full Name of Payee Sena Kozar Strategies			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2024 M M M / D D D / Y Y Y Y Y Y		
Mailing Address 3723 Jenifer St NW			Amount 22444.88		
City Washington		State DC	Zip Code 20015-1805		Transaction ID : 500455387
Purpose of Expenditure Digital and TV Ad Production - Estimate		Category/ Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2024 M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate FLORES, MAYRA, NOHEMI, ,			☐ Support ☒ Oppose		Office Sought: ☒ House District: 34 ☐ President ☐ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			220254.88 Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			145254.88		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
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 Tinsmon, Cassandra, , ,			Date M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2024 M M M / D D D / Y Y Y Y Y Y		

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PAGE 2 OF 2

FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CHC BOLD PAC		FEC IDENTIFICATION NUMBER ▼ C C00365536
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Uplift		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2024
Mailing Address 2120 University Ave		Amount 75000.00
City Berkeley	State CA	Zip Code 94704-1026
Purpose of Expenditure Digital Ad Buy - Estimate	Category/ Type 004	Transaction ID : 500455407 Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2024
Name of Federal Candidate FLORES, MAYRA, NOHEMI, , ☐ Support ☒ Oppose		Office Sought: ☒ House District: 34 ☐ President ☐ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 220254.88		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate ☐ Support ☐ Oppose		Office Sought: ☐ House District: ☐ President ☐ Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	75000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	220254.88

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.

Tinsmon, Cassandra, , ,

Signature

Date

MM / DD / YYYY
09 / 26 / 2024