

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

NAME OF COMMITTEE (In Full) Count On Connecticut			FEC IDENTIFICATION NUMBER ▼ C C00953646		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee Mission Control Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 31 / 2026		
Mailing Address 162 West Street Ste F			Amount 40891.47		
City Cromwell		State CT	Zip Code 06416	Transaction ID : SE.4176	
Purpose of Expenditure Mail Printing and Postage - Estimated		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 31 / 2026		
Name of Federal Candidate Bronin, Luke, ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: CT		
Calendar Year-To-Date Per Election for Office Sought		92261.76		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount		
City		State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure		Category/ Type			
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..... ▶			40891.47		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			40891.47		
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 Barragan, Alejandro, , ,			Date MM / DD / YYYY 08 / 01 / 2026		