

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

NAME OF COMMITTEE (In Full) Latino Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00562777		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY		
Full Name of Payee The Hamilton Campaign Network, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2026		
Mailing Address 5030 Broadway Ste 802			Amount 3750.00		
City New York		State NY	Zip Code 10034-1666	Transaction ID : 500128614	
Purpose of Expenditure Production, Non-Contribution Account		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2026		
Name of Federal Candidate PULIDO, BOBBY, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 15 ☐ President ☐ Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought		35000.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee The Hamilton Campaign Network, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2026		
Mailing Address 5030 Broadway Ste 802			Amount 3750.00		
City New York		State NY	Zip Code 10034-1666	Transaction ID : 500128615	
Purpose of Expenditure Production, Non-Contribution Account		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2026		
Name of Federal Candidate TALARICO, JAMES, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought		35000.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			7500.00		
(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 GONZALEZ, Maria, R, ,			Date MM / DD / YYYY 02 / 21 / 2026		

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NAME OF COMMITTEE (In Full) Latino Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00562777
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee The Hamilton Campaign Network, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2026
Mailing Address 5030 Broadway Ste 802		Amount 16250.00
City New York	State NY	Zip Code 10034-1666
Purpose of Expenditure Digital Ad Buy, Non-Contribution Account	Category/ Type	Transaction ID : 500128618 Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2026
Name of Federal Candidate TALARICO, JAMES, , ,	☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 35000.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee The Hamilton Campaign Network, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2026
Mailing Address 5030 Broadway Ste 802		Amount 16250.00
City New York	State NY	Zip Code 10034-1666
Purpose of Expenditure Digital Ad Buy, Non-Contribution Account	Category/ Type	Transaction ID : 500128619 Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2026
Name of Federal Candidate PULIDO, BOBBY, , ,	☒ Support ☐ Oppose	Office Sought: ☒ House District: 15 ☐ President ☐ Senate State: TX
Calendar Year-To-Date Per Election for Office Sought 35000.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	32500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	40000.00

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.

GONZALEZ, Maria, R, ,

Signature

Date

MM / DD / YYYY
02 / 21 / 2026