

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Endorse Liberty, Inc	FEC IDENTIFICATION NUMBER C C00508002
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> MM / DD / YYYY 05 / 23 / 2012 </div>	

Full Name (Last, First, Middle Initial) of Payee Facebook		Date MM / DD / YYYY 01 / 30 / 2012
Mailing Address 1601 S California Ave		Amount 317.61
City Palo Alto	State CA	Zip Code 94304
Purpose of Expenditure Online Advertising	Category/Type 004	Office Sought: <input type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 221261.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.11709

Full Name (Last, First, Middle Initial) of Payee Google		Date MM / DD / YYYY 01 / 30 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount 1268.80
City Mountain View	State CA	Zip Code 94043
Purpose of Expenditure Online Advertising	Category/Type 004	Office Sought: <input type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 221261.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.11710

(a) SUBTOTAL of Itemized Independent Expenditures.....	1586.41
(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.

Dan Backer

Signature

[Electronically Filed]

Date

MM / DD / YYYY
05 / 23 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) Endorse Liberty, Inc	FEC IDENTIFICATION NUMBER C C00508002
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> MM / DD / YYYY 05 / 23 / 2012 </div>	

Full Name (Last, First, Middle Initial) of Payee StumbleUpon		Date MM / DD / YYYY 01 / 30 / 2012
Mailing Address 301 Brannan St 6th Floor		Amount 109.90
City San Francisco	State CA	Zip Code 94107
Purpose of Expenditure Online Advertising	Category/Type 004	Office Sought: <input type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 221261.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.11711

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		MM / DD / YYYY
City	State	Zip Code
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	109.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	1696.31

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.

Dan Backer

Signature _____ [Electronically Filed] Date MM / DD / YYYY
05 / 23 / 2012