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| PAGE 1 OF 2          |
| FOR SE OF FORM 24/48 |

☐ Other (specify) \_\_\_\_\_

(c) **TOTAL** Independent Expenditures.....

FEC Schedule E (Form 24/48) Rev. 07/2011

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>ENDORSE LIBERTY INC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00508002                                                                                                |  |
| Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                   |  |
| Full Name (Last, First, Middle Initial) of Payee<br><b>StumbleUpon</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | Date<br>MM / DD / YYYY<br>02 / 24 / 2012                                                                                                         |  |
| Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Amount<br>5.40                                                                                                                                   |  |
| City State Zip Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Transaction ID : WFT20121251414-3                                                                                                                |  |
| Purpose of Expenditure<br>Online Advertising                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President                      |  |
| Category/Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | District: _____                                                                                                                                  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Paul Ron                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                           |  |
| Calendar Year-To-Date Per Election for Office Sought                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) _____ |  |
| Full Name (Last, First, Middle Initial) of Payee<br><b>Skadden</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | Date<br>MM / DD / YYYY<br>02 / 24 / 2012                                                                                                         |  |
| Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Amount<br>30665.75                                                                                                                               |  |
| City State Zip Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Transaction ID : WFT20121251414-4                                                                                                                |  |
| Purpose of Expenditure<br>Legal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President                      |  |
| Category/Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | District: _____                                                                                                                                  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br>Paul Ron                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                           |  |
| Calendar Year-To-Date Per Election for Office Sought                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) _____ |  |
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 30671.15                                                                                                                                         |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                  |  |
| (c) TOTAL Independent Expenditures.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 30773.89                                                                                                                                         |  |
| <p>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.</p> <p style="text-align: center;">Niederhauser David Abraham</p> <p>Signature _____ [Electronically Filed] Date MM / DD / YYYY<br/>02 / 25 / 2012</p> |  |                                                                                                                                                  |  |