

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

PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 15px; height: 15px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00508200</span> </div>
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 <b>Gateway Management Group</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">01 / 24 / 2012</span> </div>
Mailing Address P.O. Box 210763		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">5480.00</span> </div>
City State Zip Code St. Louis MO 63121	<b>Transaction ID : SE.4103</b>	
Purpose of Expenditure Media - Radio	Category/Type	Office Sought: <input type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		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 <input type="checkbox"/> Other (specify)

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

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">5480.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">5480.00</span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">5480.00</span> </div>

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.

*Sinclair Skinner*  
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y  
01 / 25 / 2012