

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

PAGE	1	OF	1
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) End Citizens United		FEC IDENTIFICATION NUMBER ▼ C C00573261	
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 MM / DD / YYYY	

Full Name of Payee Well And Lighthouse [MEMO ITEM] *		Date of Public Distribution/Dissemination <div> <div>M M / D D / Y Y Y Y Y</div> <div>10 / 25 / 2018</div> </div>	
Mailing Address 1130 Connecticut Ave NW Ste 675		Amount <div> <div></div> <div>39960.00</div> </div>	
City Washington	State DC	Zip Code 20036-3962	Transaction ID : VPEP0A8AMN8 Date of Disbursement or Obligation <div> <div>M M / D D / Y Y Y Y Y</div> <div></div> </div>
Purpose of Expenditure Media Buy Estimated Costs		Category/ Type <div></div>	
Name of Federal Candidate Faso, John, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>408646.35</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►

Full Name of Payee Well And Lighthouse [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2018	
Mailing Address 1130 Connecticut Ave NW Ste 675		Amount 10000.00	
City Washington	State DC	Zip Code 20036-3962	Transaction ID : VPEP0A8AMQ4 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Media Production Estimated Costs		Category/ Type	
Name of Federal Candidate Faso, John, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 408646.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div style="display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> </div> <div style="text-align: right; margin-top: 5px;">0</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> </div>
(c) TOTAL Independent Expenditures.....	▶	<div style="display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> <div style="border-bottom: 1px solid black; width: 100%;"></div> </div> <div style="text-align: right; margin-top: 5px;">0</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.

[Electronically Filed]

Signature

Date _____

MM / DD / YYYY