24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (S

PAGE 1 OF 1 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	
GREAT AMERICA PAC	C C00608489
Check if 24-hour report	
Full Name of Payee CONNELL DONATELLI, INC. Date of Public Distribution/Dissemination	
SEE ESTIMATE TRANSACTION ID# SE24.1	149571 01 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 117 NORTH SAINT ASAPH STREET	Amount
City State Zip	Code 10000.00
ALEXANDRIA VA 223	Transaction ID : SE24.149624 Date of Disbursement or Obligation
Purpose of Expenditure ONLINE VOTER CONTACT	ategory/ Type 01 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Sought: House District:
TRUMP, DONALD, J, ,	Oppose President Senate State:
Calendar Year-To-Date Per Election for Office Sought 37	Disbursement For: Primary General 2020
Full Name of Payee	Other (specify)
Full Name of Payee INFOCISION MANAGEMENT CORPORATION SEE ESTIMATE TRANSACTION ID# SE24.149572 Date of Public Distribution/Dissemination M M M / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address P.O. BOX 932441 Amount	
1 '	Transaction ID : SE24.149623 Date of Disbursement or Obligation
Purpose of Expenditure PHONE VOTER CONTACT	ategory/ Type 01 10 / 2019
Name of Federal Candidate	🗶 Support Office Sought: House District:
TRUMP, DONALD, J, ,	Oppose
Calendar Year-To-Date Per Election for Office Sought 37	Disbursement For: Primary General 2020
	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	15351.92
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	15351.92
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.	
Backer, Dan, , , [Electronically	y Filed] Date 01 10 2019
Signature	