

PAGE	1	OF	2
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00608489</span> </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="font-size: 2em; margin: 0 10px;">➤</span> <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y</div> </div>	

Full Name of Payee <b>BLACKHAWK SOLUTIONS, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 27 / 2016	
Mailing Address 6341 VALLEY VIEW RD		Amount 32000.00	
City EDMOND	State OK	Zip Code 73034	Transaction ID : SE24.93384
Purpose of Expenditure GROUND GAME CAMPAIGN MATERIALS	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 26 / 2016	
Name of Federal Candidate TRUMP, DONALD, J, ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought	14497060.70	Disbursement For: 2016	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►

Full Name of Payee <b>CONNELL DONATELLI, INC</b>		Date of Public Distribution/Dissemination <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 27 / 2016</div> </div>	
Mailing Address PO BOX 1877		Amount <div> <div></div> <div>10000.00</div> </div>	
City ALEXANDRIA	State VA	Zip Code 22313	<b>Transaction ID : SE24.93383</b> Date of Disbursement or Obligation <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 26 / 2016</div> </div>
Purpose of Expenditure NATIONAL GOTV DIGITAL AD BUY		Category/ Type	
Name of Federal Candidate TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>14497060.70</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	42000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> 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.

Backer, Dan, , ,

*[Electronically Filed]*

Date \_\_\_\_\_

Signature

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

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00608489       </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 of Payee <b>FRONTLINE STRATEGIES &amp; MEDIA</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 31 / 2016</div> </div>	
Mailing Address 110 NEWPORT CENTER DRIVE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1100000.00</div>	
City NEWPORT BEACH	State CA	Zip Code 92660	Transaction ID : <b>SE24.93368</b>
Purpose of Expenditure NATIONAL GOTV TV AND DIGITAL AD BUY	Category/Type		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 26 / 2016</div> </div>
Name of Federal Candidate TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">14497060.70</div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FRONTLINE STRATEGIES &amp; MEDIA</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 01 / 2016</div> </div>	
Mailing Address 110 NEWPORT CENTER DRIVE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">385883.59</div>	
City NEWPORT BEACH	State CA	Zip Code 92660	Transaction ID : <b>SE24.93367</b>
Purpose of Expenditure NATIONAL GOTV BUS TOUR	Category/Type		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 26 / 2016</div> </div>
Name of Federal Candidate TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">14497060.70</div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1485883.59</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1527883.59</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.

Backer, Dan, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 26 / 2016

Signature