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

GREAT AMERICA PAC Food Destrict Continue Fee to Destrict Continue F	Schedule E) FOR SE OF FORM 24/48	
C C00508489 Check If	NAME OF COMMITTEE (In Full)	
Full Name of Payee MESSAGE MADE EASY Mailing Address PO BOX 230 Name of Federal Candidate GIANFORTE, GREG.,	GREAT AMERICA PAC	
Purpose of Expenditure State St		C C0000469
MESSAGE MADE EASY Mailing Address PO BOX 230 City State Zip Code CANAL FULTON OH 44614 Purpose of Expenditure RINGLESS VOICEMAILS Name of Federal Candidate Glahefort*, GREG, Calendar Year-To-Date Per Election for Office Sought Mailing Address Amount Category/ Type President Senate State. MT Calendar Year-To-Date Per Election for Office Sought Mailing Address Amount Category/ Type Date of Disbursement For: Primary General 2017 Category/ Type Name of Federal Candidate Category/ Type Name of Federal Candidate Category/ Type Name of Federal Candidate Category/ Type Date of Disbursement or Obligation Date of Disbursement or Obligation Category/ Type Name of Federal Candidate Support Category/ Type Date of Disbursement or Obligation Type Other (specify) ▶ Other (specify) ▶ Other	Check if 24-hour report 48-hour report New report An	
Mailing Address PO BOX 230 City State Zip Code CANAL FULTON OH 44614 Purpose of Expenditure Rivor Page Calendar Year-To-Date Purpose of Expenditure City State Zip Code Mailing Address City State Zip Code Disbursement For: Primary General 2017 Amount Calendar Year-To-Date President Senate State: MT Disbursement For: Primary General 2017 Mailing Address City State Zip Code Date of Disbursement or Obligation Date of Disbursement or Obligation City State Zip Code Date of Disbursement or Obligation Category/ Non-Calendar Year-To-Date President Senate State: MT Date of Disbursement or Obligation Category/ Office Sought House District: OO Date of Disbursement or Obligation Category/ Office Sought State: Disbursement or Obligation Category/ Non-Calendar Year-To-Date President Senate State: Oppose President Senate State: Oppose Oppose President Senate State: Oppose	Full Name of Payee	Date of Public Distribution/Dissemination
City State Zip Code CANAL FULTON OH 44614 Purpose of Expenditure RINGLESS VOICEMAILS Name of Federal Candidate GIANFORTE, GREG Calendar Year-To-Date Per Election for Office Sought City State Zip Code Disbursement For: Primary General Purpose of Expenditure City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Disbursement For: Primary General Purpose of Expenditure Category/ Type Date of Disbursement or Obligation Date of Disbursement or Obligation Date of Disbursement or Obligation City State Zip Code Date of Disbursement or Obligation Date of Disbursement for: Purpose of Expenditures Date of Disbursement for: Purp		
CANAL FULTON OH 44614 Purpose of Expenditure RINGLESS VOICEMAILS Name of Federal Candidate GIANFORTE, GREG, ,	Mailing Address PO BOX 230	Amount
CANAL FULTON OH 44614 Purpose of Expenditure RINGLESS VOICEMAILS Name of Federal Candidate GIANFORTE, GREG, ,	City State Zip Code	3354.54
Name of Federal Candidate State Zip Code		
GIANFORTE, GREG,	PINGLESS VOICEMAILS	
Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Date of Public Distribution/Dissemination	Name of Federal Candidate	Support Office Sought: M House District: 00
Per Election for Office Sought Special	GIANFORTE, GREG, , ,	Oppose President Senate State: MT
Full Name of Payee Date of Public Distribution/Dissemination Mailing Address	2074	2017
Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Oppose President Senate State: Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary General Other (specify) (a) SUBTOTAL of Unitemized Independent Expenditures. (b) SUBTOTAL of Unitemized Independent Expenditures. (c) TOTAL 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 Date Date Amount Amount Amount Date of Disbursement or Obligation District: Primary General Other (specify) 3354.54	Full Name of Payee	
City State Zip Code Date of Disbursement or Obligation		M = M / D = D / Y = Y = Y
City State Zip Code Date of Disbursement or Obligation	Mailing Address	Amount
Purpose of Expenditure Category/ Type		Amount
Purpose of Expenditure Category/ Type	City State Zip Code	
Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Calendar Year-To-Date Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures. (b) SUBTOTAL of Unitemized Independent Expenditures. (c) TOTAL 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. [Electronically Filed] Date Office Sought: House District: Oppose President Senate State: Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Date Other (specify)		Date of Disbursement or Obligation
Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures	Category/	
Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures	Name of Federal Candidate	Support Office Sought: House District:
Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures		Oppose President Senate State:
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
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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 04 24 2017	(c) TOTAL Independent Expenditures	3354.54
[Electronically Filed] Date 04 24 2017	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	
		0.4