

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 GREAT AMERICA PAC

ADDRESS (number and street) 107 S West St Suite 555 Alexandria VA 22314 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00608489 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) [] May 20 (M5) [X] Aug 20 (M8) [] Nov 20 (M11) (Non-Election Year Only) [] Mar 20 (M3) [] Jun 20 (M6) [] Sep 20 (M9) [] Dec 20 (M12) (Non-Election Year Only) [] Apr 20 (M4) [] Jul 20 (M7) [] Oct 20 (M10) [] Jan 31 (YE) [] (c) 12-Day PRE-Election Report for the: Primary (12P) [] General (12G) [] Runoff (12R) [] Convention (12C) [] Special (12S) [] Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) [] Runoff (30R) [] Special (30S) [] Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2016 through 04 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Dan Backer

Signature of Treasurer Dan Backer [Electronically Filed] Date 05 / 20 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

GREAT AMERICA PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="-316734.21"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="513605.98"/>	<input type="text" value="1066587.57"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="196871.77"/>	<input type="text" value="1066587.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="131635.45"/>	<input type="text" value="1001351.25"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="65236.32"/>	<input type="text" value="65236.32"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="300000.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

GREAT AMERICA PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	48415.00	60785.00
(ii) Unitemized	412743.93	549672.52
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	461158.93	610457.52
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	461158.93	610457.52
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	50000.00	300000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	2.55	3685.55
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2444.50	152444.50
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	513605.98	1066587.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	513605.98	1066587.57

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	25258.94	34915.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	25258.94	34915.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	360.00	6234.00
24. Independent Expenditures (use Schedule E)	105765.00	852384.41
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	70.00	70.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	70.00	70.00
29. Other Disbursements	181.51	107747.51
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	131635.45	1001351.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131635.45	1001351.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	461158.93	610457.52
34. Total Contribution Refunds (from Line 28(d))	70.00	70.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	461088.93	610387.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	25258.94	34915.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2.55	3685.55
38. Net Operating Expenditures (subtract Line 37 from Line 36)	25256.39	31229.78

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. GLORIA AKERS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 50164

City DENTON	State TX	Zip Code 76206-0164
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 01 / 2016
Transaction ID : SA11A.272625

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. GLORIA AKERS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 50164

City DENTON	State TX	Zip Code 76206-0164
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 26 / 2016
Transaction ID : SA11A.278633

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. JOHN ANDERSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 136

City GAIL	State TX	Zip Code 79738-0136
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 22 / 2016
Transaction ID : SA11A.277600

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. LYNNE ARCHER
Full Name (Last, First, Middle Initial)

Mailing Address 20 SAINT PETERS WALK

City SUGAR LAND State TX Zip Code 77479-2525

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCHER VOLKSWAGEN&ARCHER KIA Occupation SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 04 / 01 / 2016
Transaction ID : SA11A.272939

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

B. LYNNE ARCHER
Full Name (Last, First, Middle Initial)

Mailing Address 20 SAINT PETERS WALK

City SUGAR LAND State TX Zip Code 77479-2525

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCHER VOLKSWAGEN&ARCHER KIA Occupation SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 04 / 14 / 2016
Transaction ID : SA11A.275025

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

C. LYNNE ARCHER
Full Name (Last, First, Middle Initial)

Mailing Address 20 SAINT PETERS WALK

City SUGAR LAND State TX Zip Code 77479-2525

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCHER VOLKSWAGEN&ARCHER KIA Occupation SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 04 / 26 / 2016
Transaction ID : SA11A.278617

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2050.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. GEORGE ATKINSON
Full Name (Last, First, Middle Initial)

Mailing Address 8197 NW 5TH ST

City POMPANO BEACH State FL Zip Code 33071-6745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2016
Transaction ID : SA11A.270306

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. BEN ATTAWAY
Full Name (Last, First, Middle Initial)

Mailing Address 2238 GUMLOG RD

City WRIGHTSVILLE State GA Zip Code 31096-5657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2016
Transaction ID : SA11A.277569

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. CAROL AUSTIN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2595

City BAXTER State MN Zip Code 56425-2595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2016
Transaction ID : SA11A.273499

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 520.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial) A. CAROL AUSTIN		Date of Receipt MM / DD / YYYY 04 / 22 / 2016 Transaction ID : SA11A.277692
Mailing Address P.O. BOX 2595		Amount of Each Receipt this Period 100.00
City BAXTER	State MN	Zip Code 56425-2595
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. LUCY AVERILL		Date of Receipt MM / DD / YYYY 04 / 05 / 2016 Transaction ID : SA11A.270746
Mailing Address 202 WEXFORD CT		Amount of Each Receipt this Period 50.00
City CANTON	State GA	Zip Code 30115-6465
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. LUCY AVERILL		Date of Receipt MM / DD / YYYY 04 / 28 / 2016 Transaction ID : SA11A.279967
Mailing Address 202 WEXFORD CT		Amount of Each Receipt this Period 50.00
City CANTON	State GA	Zip Code 30115-6465
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. STEVEN AYERS
Full Name (Last, First, Middle Initial)
Mailing Address 48 MONTE VISTA DR.
City SCOTTSBORO State AL Zip Code 35768-7522
FEC ID number of contributing federal political committee. **C**
Name of Employer HIGH COUNTRY TOYOTA Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 01 / 2016
Transaction ID : SA11A.273241
Amount of Each Receipt this Period 200.00
 Memo Item
CONTRIBUTION

B. STEVEN AYERS
Full Name (Last, First, Middle Initial)
Mailing Address 48 MONTE VISTA DR.
City SCOTTSBORO State AL Zip Code 35768-7522
FEC ID number of contributing federal political committee. **C**
Name of Employer HIGH COUNTRY TOYOTA Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 18 / 2016
Transaction ID : SA11A.281184
Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

C. JAMES BAILEY
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1290
City CALVERT CITY State KY Zip Code 42029-1290
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF()
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 04 / 04 / 2016
Transaction ID : SA11A.270177
Amount of Each Receipt this Period 150.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. JAMES BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1290

City CALVERT CITY State KY Zip Code 42029-1290

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2016

Transaction ID : SA11A.275022

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. JAMES BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1290

City CALVERT CITY State KY Zip Code 42029-1290

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2016

Transaction ID : SA11A.278466

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

C. ALEX BERNHARD
Full Name (Last, First, Middle Initial)

Mailing Address 6000 IMUS RD

City CARSON CITY State NV Zip Code 89706-0165

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : SA11A.277950

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. JOHN BIENNAN
Full Name (Last, First, Middle Initial)

Mailing Address 50 EVERSON ST

City SAN FRANCISCO State CA Zip Code 94131-2636

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11A.278254

Amount of Each Receipt this Period
 500.00

Memo Item
CONTRIBUTION

B. CATHERINE BLACKMON
Full Name (Last, First, Middle Initial)

Mailing Address 6904 E. OSBORN RD UNIT D

City SCOTTSDALE State AZ Zip Code 85251-6206

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2016
Transaction ID : SA11A.281030

Amount of Each Receipt this Period
 300.00

Memo Item
CONTRIBUTION

C. RODNEY BLUM
Full Name (Last, First, Middle Initial)

Mailing Address 395 34 1/2 RD

City PALISADE State CO Zip Code 81526-9522

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 12 / 2016
Transaction ID : SA11A.273838

Amount of Each Receipt this Period
 500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. LAURA BRIDGES

Mailing Address 146 STATE ROUTE 34

City State Zip Code
HOLMDEL NJ 07733-2407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 14 / 2016

Transaction ID : SA11A.274900

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ROBERT BROWN

Mailing Address 250B 240TH ST

City State Zip Code
OSCEOLA WI 54020-5903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : SA11A.270875

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ROBERT BROWN

Mailing Address 250B 240TH ST

City State Zip Code
OSCEOLA WI 54020-5903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : SA11A.273519

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **900.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. GREGORY BURKHART
Full Name (Last, First, Middle Initial)

Mailing Address 27290 HOWLAND LN

City MECHANICSVILLE State MD Zip Code 20659-

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
04 / 06 / 2016
Transaction ID : SA11A.271151

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. BILL CARTY
Full Name (Last, First, Middle Initial)

Mailing Address 2110 E. GLENALDEN DRIVE

City GERMANTOWN State TN Zip Code 38139-5447

FEC ID number of contributing federal political committee. **C**

Name of Employer CARTY & COMPANY INC. Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
04 / 08 / 2016
Transaction ID : SA11A.280997

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. BILL CARTY
Full Name (Last, First, Middle Initial)

Mailing Address 2110 E. GLENALDEN DRIVE

City GERMANTOWN State TN Zip Code 38139-5447

FEC ID number of contributing federal political committee. **C**

Name of Employer CARTY & COMPANY INC. Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
04 / 20 / 2016
Transaction ID : SA11A.281248

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. CINDY CASEY
Full Name (Last, First, Middle Initial)
Mailing Address 6085 OHIO ST
City YORBA LINDA State CA Zip Code 92886-5302
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2016
Transaction ID : SA11A.278341
Amount of Each Receipt this Period
250.00
 Memo Item
CONTRIBUTION

B. MRS. BEULAH CHACONE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 787
City BISHOP State CA Zip Code 93515-0787
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2016
Transaction ID : SA11A.281847
Amount of Each Receipt this Period
500.00
 Memo Item
CONTRIBUTION

C. MR. ROY CHACONE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 787
City BISHOP State CA Zip Code 93515-0787
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2016
Transaction ID : SA11A.272627
Amount of Each Receipt this Period
500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. REBECCA CHAPMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 18026 CLENDENNING CIR
 City ROUND HILL State VA Zip Code 20141-2579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 21 / 2016
Transaction ID : SA11A.277047
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SEAN CLOUDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 331 CLEVELAND ST
 City CLEARWATER State FL Zip Code 33755-4051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer M4L INC. Occupation WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 02 / 2016
Transaction ID : SA11A.280869
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CAROL COATES
 Full Name (Last, First, Middle Initial)
 Mailing Address 218 QUINLAN ST
 City KERRVILLE State TX Zip Code 78028-5314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 01 / 2016
Transaction ID : SA11A.273104
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. BOBBY COGBELL
Full Name (Last, First, Middle Initial)

Mailing Address 111 N MAIN ST

City LEXINGTON State TN Zip Code 38351-2049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 26 / 2016
Transaction ID : SA11A.278371

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. JOHN COGGINS
Full Name (Last, First, Middle Initial)

Mailing Address 8500 SENTINAE CHASE DR.

City ROSWELL State GA Zip Code 30076-4464

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 26 / 2016
Transaction ID : SA11A.278503

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. CHARLES COLE
Full Name (Last, First, Middle Initial)

Mailing Address 259 CHURCHILL RD

City TURTLE CREEK State PA Zip Code 15145-1155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 27 / 2016
Transaction ID : SA11A.278682

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. ANN COOLLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 23279
 City LEXINGTON State KY Zip Code 40523-3279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2016
Transaction ID : SA11A.276335
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. MICHAEL DEANER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12263 EAGLE HEART DR.
 City EL PASO State TX Zip Code 79936-8605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2016
Transaction ID : SA11A.278798
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. GARRY DEPAEPE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3310 47TH AVENUE
 City MOLINE State IL Zip Code 61265-7341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2016
Transaction ID : SA11A.272459
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. JOSEPHINE DETAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1889 MEADS HILL RD
 City WATKINS GLEN State NY Zip Code 14891-9508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016
Transaction ID : SA11A.274892
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. BIRGIT DEWHURST
 Full Name (Last, First, Middle Initial)
 Mailing Address 350 CALLE LA MESA
 City MORAGA State CA Zip Code 94556-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11A.281586
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. DONALD DOUGHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 76245 VIA SATURNIA
 City INDIAN WELLS State CA Zip Code 92210-7869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2016
Transaction ID : SA11A.277269
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. JOHN DOWD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1529 CROWELL RD
 City VIENNA State VA Zip Code 22182-1514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2016
Transaction ID : SA11A.281370
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. HOWARD DUDLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 139
 City CLEBURNE State TX Zip Code 76033-0139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TECHNICAL CHEMICAL COMPANY Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2016
Transaction ID : SA11A.274245
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. SOUSSAN DYE
 Full Name (Last, First, Middle Initial)
 Mailing Address 14106 SUMMIT CREST
 City ESCONDIDO State CA Zip Code 92025-7553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2016
Transaction ID : SA11A.281288
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. BONNIE ECKELBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 STANLEY ST
 City KILLDEER State ND Zip Code 58640-4203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2016
Transaction ID : SA11A.273052
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GEORGE FEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 12664 W BANK DR. NE
 City MILLERSPORT State OH Zip Code 43046-9018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2016
Transaction ID : SA11A.280478
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. GERALD FORSYTHE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1765 BRAYMORE DR.
 City INVERNESS State IL Zip Code 60010-6409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2016
Transaction ID : SA11A.280730
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	1750.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. REGINALD FOUNTAIN
Full Name (Last, First, Middle Initial)
Mailing Address 204 EASTBROOK DR.
City GREENVILLE State NC Zip Code 27858-4212
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 14 / 2016
Transaction ID : SA11A.275332
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. REGINALD FOUNTAIN
Full Name (Last, First, Middle Initial)
Mailing Address 204 EASTBROOK DR.
City GREENVILLE State NC Zip Code 27858-4212
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 28 / 2016
Transaction ID : SA11A.280090
Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

C. KATHERINE FRANCESCON
Full Name (Last, First, Middle Initial)
Mailing Address 20 CHERRY HILLS PARK DRIVE
City ENGLEWOOD State CO Zip Code 80113-7175
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
RETIRED RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 18 / 2016
Transaction ID : SA11A.281186
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. ROBERT FRAZIER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 577

City INGRAM State TX Zip Code 78025-0577

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 05 / 2016
Transaction ID : SA11A.270626

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. JOSEPH FRESOLO
Full Name (Last, First, Middle Initial)

Mailing Address 1128 CARRIAGE DR.

City AIKEN State SC Zip Code 29803-5556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 29 / 2016
Transaction ID : SA11A.280542

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. LORI FREUDENBERG
Full Name (Last, First, Middle Initial)

Mailing Address 712 SHORELINE POINTE

City EL DORADO HILLS State CA Zip Code 95762-3631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 05 / 2016
Transaction ID : SA11A.270533

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. ALEXANDER GIANOTAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3438 DANIEL AV
 APT 2
 City DALLAS State TX Zip Code 75205-1872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2016
Transaction ID : SA11A.270198
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. ROSS GILLESPIE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 7310
 City BECKLEY State WV Zip Code 25802-7310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2016
Transaction ID : SA11A.277407
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DIRK GRIFFIN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 26064
 City ANAHEIM State CA Zip Code 92825-6064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2016
Transaction ID : SA11A.271051
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. BARBARA HAYDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 W HENRY ST
 City SEDALIA State MO Zip Code 65301-2753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STARLINE INC Occupation SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt 04 / 08 / 2016
Transaction ID : SA11A.272119
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

B. DIANE HERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1650 NEZ PERCE LOOP NE
 City RIO RANCHO State NM Zip Code 87144-7707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt 04 / 14 / 2016
Transaction ID : SA11A.275228
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. MICHAEL HERRING
 Full Name (Last, First, Middle Initial)
 Mailing Address 426 EH COURT
 City BRUNSWICK State GA Zip Code 31520-2199
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation I OWN AN INDEPENDENT INS. AGENCY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt 04 / 20 / 2016
Transaction ID : SA11A.281243
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. K HILL
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1812

City GALESBURG State IL Zip Code 61402-1812

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
04 / 04 / 2016
Transaction ID : SA11A.270350

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

BEST EFFORTS FOLLOW UP INCLUDED REQUEST FOR FULL NAME

B. JENNIFER HOLLAND
Full Name (Last, First, Middle Initial)

Mailing Address 412 BOWDOIN CIRCLE

City SARASOTA State FL Zip Code 34236-1102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
04 / 18 / 2016
Transaction ID : SA11A.281147

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GARY LEE HOLLINGSWORTH
Full Name (Last, First, Middle Initial)

Mailing Address 1515 E DOVE RD

City SOUTHLAKE State TX Zip Code 76092-3916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
04 / 26 / 2016
Transaction ID : SA11A.278404

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial) A. BOBBY HURST		Date of Receipt MM / DD / YYYY 04 / 07 / 2016 Transaction ID : SA11A.280939
Mailing Address 2010 WHISPER LANE		Amount of Each Receipt this Period 50.00
City FAYETTEVILLE	State NC	Zip Code 28303-7002
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> CONTRIBUTION	
Name of Employer HURST ANNAHO SUPPLY	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. BOBBY HURST		Date of Receipt MM / DD / YYYY 04 / 11 / 2016 Transaction ID : SA11A.281070
Mailing Address 2010 WHISPER LANE		Amount of Each Receipt this Period 25.00
City FAYETTEVILLE	State NC	Zip Code 28303-7002
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> CONTRIBUTION	
Name of Employer HURST ANNAHO SUPPLY	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. BOBBY HURST		Date of Receipt MM / DD / YYYY 04 / 20 / 2016 Transaction ID : SA11A.281249
Mailing Address 2010 WHISPER LANE		Amount of Each Receipt this Period 25.00
City FAYETTEVILLE	State NC	Zip Code 28303-7002
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> CONTRIBUTION	
Name of Employer HURST ANNAHO SUPPLY	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. BOBBY HURST
 Full Name (Last, First, Middle Initial)
 Mailing Address 2010 WHISPER LANE
 City FAYETTEVILLE State NC Zip Code 28303-7002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HURST ANNAHO SUPPLY Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **04 / 27 / 2016**
Transaction ID : SA11A.281371
 Amount of Each Receipt this Period **50.00**
 Memo Item
 CONTRIBUTION

B. VINCENT INTRIERI
 Full Name (Last, First, Middle Initial)
 Mailing Address 328 EAST 48TH STREET APT 39A
 City NEW YORK State NY Zip Code 10017-1727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ICAHN PARTNERS Occupation INVESTMENT FIRM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **04 / 28 / 2016**
Transaction ID : SA11A.281384
 Amount of Each Receipt this Period **250.00**
 Memo Item
 CONTRIBUTION

C. MARK KELLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6133 CRUXTEN DR.
 City DAYTON State OH Zip Code 45424-3740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **04 / 20 / 2016**
Transaction ID : SA11A.276677
 Amount of Each Receipt this Period **300.00**
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. JOSEPH KELLY
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 610
 City LIBERTY State MS Zip Code 39645-0610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2016
Transaction ID : SA11A.279916
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DONALD KINNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1515 AUSTRINA PASS
 City AUSTIN State TX Zip Code 78732-2398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2016
Transaction ID : SA11A.271600
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. FRED KLEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 36584 S WIND CREST DR.
 City TUCSON State AZ Zip Code 85739-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2016
Transaction ID : SA11A.275510
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. CHARLES KNIGHT
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 14790

City JACKSON State WY Zip Code 83002-4790

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MEMORIAL HOSPITAL OF SWEETWATER CC PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 20 / 2016
Transaction ID : SA11A.276394

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. FRANKLIN KUHN
Full Name (Last, First, Middle Initial)

Mailing Address 5303 GLIDE SLOPE CT

City GRANBURY State TX Zip Code 76049-4331

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 06 / 2016
Transaction ID : SA11A.271377

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. RANDALL KUMZ
Full Name (Last, First, Middle Initial)

Mailing Address 742 N MANASOTA KEY RD

City ENGLEWOOD State FL Zip Code 34223-9757

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 07 / 2016
Transaction ID : SA11A.271589

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. JOY LAMB
Full Name (Last, First, Middle Initial)

Mailing Address 1930 MONTGOMERY PL

City JACKSONVILLE State FL Zip Code 32205-9319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2016
Transaction ID : SA11A.276816

Amount of Each Receipt this Period
 1000.00

Memo Item CONTRIBUTION

B. BENJAMIN LEON
Full Name (Last, First, Middle Initial)

Mailing Address 630 LEUCADENDRA DR.

City MIAMI State FL Zip Code 33156-2332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016
Transaction ID : SA11A.280202

Amount of Each Receipt this Period
 1000.00

Memo Item CONTRIBUTION

C. SHIRLEY LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 12634 GIANELLA RD.

City CHICO State CA Zip Code 95973-9742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2016
Transaction ID : SA11A.277260

Amount of Each Receipt this Period
 75.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2075.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. SHIRLEY LEWIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 12634 GIANELLA RD.
 City CHICO State CA Zip Code 95973-9742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11A.278003
 Amount of Each Receipt this Period
 75.00
 Memo Item
 CONTRIBUTION

B. SHIRLEY LEWIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 12634 GIANELLA RD.
 City CHICO State CA Zip Code 95973-9742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2016
Transaction ID : SA11A.280435
 Amount of Each Receipt this Period
 35.00
 Memo Item
 CONTRIBUTION

C. SHIRLEY LEWIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 12634 GIANELLA RD.
 City CHICO State CA Zip Code 95973-9742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2016
Transaction ID : SA11A.280461
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. FRANCES LUNDBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 8956 S EISENHOWER RD
 City TUCSON State AZ Zip Code 85756-9519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016
Transaction ID : SA11A.275074
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CRAIG MAGUIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3797 SHOAL CREEK RD
 City MURPHY State NC Zip Code 28906-2049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : SA11A.281307
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. TIGRAN MARTINIAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2801 CAHUENGA BLVD W
 City LOS ANGELES State CA Zip Code 90068-2106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2016
Transaction ID : SA11A.276346
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. DAN MCKILLOP
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1002

City GILLETTE State WY Zip Code 82717-1002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 07 / 2016
Transaction ID : SA11A.271570

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. JEFF MING
Full Name (Last, First, Middle Initial)

Mailing Address 333 HIGHWAY 32

City SHELBY State MS Zip Code 38774-2428

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 06 / 2016
Transaction ID : SA11A.271301

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. DENNIS MITCHEM
Full Name (Last, First, Middle Initial)

Mailing Address 1616 W GLENDALE AV #588

City PHOENIX State AZ Zip Code 85021-8948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 22 / 2016
Transaction ID : SA11A.281304

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. TOM MYERS
Full Name (Last, First, Middle Initial)

Mailing Address 7103 E SPRING HILL RD

City PORT ORCHARD	State WA	Zip Code 98366-8013
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALL STAR LANES & CASINO	Occupation OWNER
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2016
Transaction ID : SA11A.281009

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. ROBERT NICHOLSON
Full Name (Last, First, Middle Initial)

Mailing Address 176 SUNSET CIR N

City SAINT AUGUSTINE	State FL	Zip Code 32080-5160
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016
Transaction ID : SA11A.275342

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. ROBERT NICHOLSON
Full Name (Last, First, Middle Initial)

Mailing Address 176 SUNSET CIR N

City SAINT AUGUSTINE	State FL	Zip Code 32080-5160
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016
Transaction ID : SA11A.281629

Amount of Each Receipt this Period
400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. LISA NOVACEK
Full Name (Last, First, Middle Initial)

Mailing Address 7103 PALUXY DR.

City IRVING State TX Zip Code 75039-3360

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FINANCIAL SERVICES CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2016
Transaction ID : SA11A.281372

Amount of Each Receipt this Period
 2000.00

Memo Item
CONTRIBUTION

B. DEREK O' BRIEN
Full Name (Last, First, Middle Initial)

Mailing Address 12759 BIGGIN CHURCH ROAD SOUTH

City JACKSONVILLE State FL Zip Code 32224-7934

FEC ID number of contributing federal political committee. **C**

Name of Employer OB3 HOLDINGS INC. Occupation SELF/BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2016
Transaction ID : SA11A.280912

Amount of Each Receipt this Period
 250.00

Memo Item
CONTRIBUTION

C. DEREK O' BRIEN
Full Name (Last, First, Middle Initial)

Mailing Address 12759 BIGGIN CHURCH ROAD SOUTH

City JACKSONVILLE State FL Zip Code 32224-7934

FEC ID number of contributing federal political committee. **C**

Name of Employer OB3 HOLDINGS INC. Occupation SELF/BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2016
Transaction ID : SA11A.281231

Amount of Each Receipt this Period
 250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. MICHAEL OBRIEN
Full Name (Last, First, Middle Initial)

Mailing Address 4309 CARUTH BLVD

City DALLAS State TX Zip Code 75225-6628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 27 / 2016
Transaction ID : SA11A.278902

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. EDWARD PACE
Full Name (Last, First, Middle Initial)

Mailing Address 9412 CRESCENT BAR RD NW

City QUINCY State WA Zip Code 98848-9121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 28 / 2016
Transaction ID : SA11A.280299

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. MERYL PATTON
Full Name (Last, First, Middle Initial)

Mailing Address 212 OAKMONT DR.

City ROANOKE State TX Zip Code 76262-5472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 08 / 2016
Transaction ID : SA11A.272444

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 87
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. ALEXIS PAULLO

Mailing Address 7770 STARHILL WAY

City SPARKS State NV Zip Code 89436-6812

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 28 / 2016
Transaction ID : SA11A.280242

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. VINCENT PHILLIPS

Mailing Address 3838 SAN DIMAS ST

City BAKERSFIELD State CA Zip Code 93301-2284

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 25 / 2016
Transaction ID : SA11A.281333

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. KENNY PHIPPS

Mailing Address P.O. BOX 151

City SULPHUR State LA Zip Code 70664-0151

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2016
Transaction ID : SA11A.275181

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. SUSAN PORTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5230 E HONEYWOOD LN
 City ANAHEIM State CA Zip Code 92807-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11A.278006
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. GARY PROOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 8091 ASHWOOD DR. SE
 City ADA State MI Zip Code 49301-8166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2016
Transaction ID : SA11A.270159
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BRADLEY RAGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 683 MR. HENRY RD
 City MOCKSVILLE State NC Zip Code 27028-5360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11A.277904
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. CHRIS RICHARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3127 BONNELL AVE SE
 City GRAND RAPIDS State MI Zip Code 49506-3135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 26 / 2016
Transaction ID : SA11A.278270
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. MARK RODACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 16051 COLLINS AVE APT 3502
 3502
 City SUNNY ISLES BEACH State FL Zip Code 33160-4624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2016
Transaction ID : SA11A.280916
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. SANDRA SALKA
 Full Name (Last, First, Middle Initial)
 Mailing Address 347 10TH ST
 City SANTA MONICA State CA Zip Code 90402-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016
Transaction ID : SA11A.275357
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. DAN SCHMUCKER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 514

City BRYN ATHYN State PA Zip Code 19009-0514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 14 / 2016
Transaction ID : SA11A.274765

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. FRANK SCHWERTFEGER
Full Name (Last, First, Middle Initial)

Mailing Address 12244 WHEELING CT

City HENDERSON State CO Zip Code 80640-9426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016
Transaction ID : SA11A.270700

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. MAURICE SHAW
Full Name (Last, First, Middle Initial)

Mailing Address 1311 BUHNE ST

City EUREKA State CA Zip Code 95501-4205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2016
Transaction ID : SA11A.270585

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. RICKY SHELTON
Full Name (Last, First, Middle Initial)

Mailing Address 21195 BAT CAVE RD

City SAN ANTONIO State TX Zip Code 78266-2099

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 12 / 2016
Transaction ID : SA11A.273978

Amount of Each Receipt this Period
 1000.00

Memo Item CONTRIBUTION

B. LOUISE SLOCUM
Full Name (Last, First, Middle Initial)

Mailing Address 15300 SW 35TH ST

City DAVIE State FL Zip Code 33331-2726

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016
Transaction ID : SA11A.270543

Amount of Each Receipt this Period
 250.00

Memo Item CONTRIBUTION

C. ROBERT SNELLENBERG
Full Name (Last, First, Middle Initial)

Mailing Address 5839 SOUTH WEBB ROAD

City DERBY State KS Zip Code 67037-9228

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : SA11A.281314

Amount of Each Receipt this Period
 260.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1510.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. STAVRO SOUSSOU
Full Name (Last, First, Middle Initial)

Mailing Address 29 E RIDGEWOOD AVE

City PARAMUS State NJ Zip Code 07652-3603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2016
Transaction ID : SA11A.279020

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. WILLIAM STEVENS
Full Name (Last, First, Middle Initial)

Mailing Address 3040 ROCKBRIDGE RD

City MC GREGOR State TX Zip Code 76657-3452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2016
Transaction ID : SA11A.274734

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. SCOTT STOVALL
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 456

City TROUP State TX Zip Code 75789-0456

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2016
Transaction ID : SA11A.275376

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 87
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. THOMAS TEAGUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 CHARLOIS BLVD
 City WINSTON SALEM State NC Zip Code 27103-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2016
Transaction ID : SA11A.271571
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DAVID THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 49
 City MONROE State GA Zip Code 30655-0049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2016
Transaction ID : SA11A.278470
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BILL TISDALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1426 ROBERT E LEE LN
 City BRENTWOOD State TN Zip Code 37027-6827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2016
Transaction ID : SA11A.280243
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. DAVID TRUDEAU
Full Name (Last, First, Middle Initial)

Mailing Address 1100 SE 15TH AVE

City DEERFIELD BEACH State FL Zip Code 33441-7126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 01 / 2016
Transaction ID : SA11A.272883

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. JOHN WALKER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX G

City MERRILL State OR Zip Code 97633-0607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 28 / 2016
Transaction ID : SA11A.280091

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BERNARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address 315 W ELLIOT SUITE 170 606

City TEMPE State AZ Zip Code 85284-1328

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
04 / 12 / 2016
Transaction ID : SA11A.273565

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 87
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

A. JAMES WEBSTER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 804

City WEATHERFORD State TX Zip Code 76086-0804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 12 / 2016
Transaction ID : SA11A.274050

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. RICHARD WEISMAN
Full Name (Last, First, Middle Initial)

Mailing Address 149 MOSS RD NW

City SEATTLE State WA Zip Code 98177-8002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 20 / 2016
Transaction ID : SA11A.276603

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	48415.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 87
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial) A. ERIC BEACH		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 21 / 2016
Mailing Address 344 E 16TH STREET		Transaction ID : SA13.84543
City COSTA MESA State CA Zip Code 92627	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50000.00
Name of Employer FRONTLINE STRATEGIES & MEDIA Occupation MANAGING PARTNER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item CAREY ACCT: LOAN
Aggregate Year-to-Date ▼ 50000.00		

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....▶	50000.00
TOTAL This Period (last page this line number only).....▶	50000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 87
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial) A. MANNY GARCIA		Date of Receipt MM / DD / YYYY 04 / 30 / 2016
Mailing Address 941 TUSKAWILLA TRAIL		Transaction ID : SA17.281780
City WINTER SPRINGS	State FL	Zip Code 32708-4023
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) B. JAMES VOLKER		Date of Receipt MM / DD / YYYY 04 / 30 / 2016
Mailing Address 7 CIMARRON DR.		Transaction ID : SA17.281783
City GREENWOOD VILLAGE	State CO	Zip Code 80121-1225
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer WHITING PETROLEUM CORP	Occupation CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	NON CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	1250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. ERIC BEACH

Mailing Address 344 E 16TH STREET

City COSTA MESA State CA Zip Code 92627

Purpose of Disbursement
REIMBURSEMENT OF TRAVEL EXPENSES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2016

Transaction ID : **SB21B.I83960**

Amount of Each Disbursement this Period

1450.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AMY KREMER

Mailing Address 4308 N. SMOKE RIDGE CT., NE

City ROSWELL State GA Zip Code 30075

Purpose of Disbursement
STAFF COMPENSATION

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2016

Transaction ID : **SB21B.I83956**

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DB CAPITOL STRATEGIES

Mailing Address 203 SOUTH UNION STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-3356

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2016

Transaction ID : **SB21B.I83963**

Amount of Each Disbursement this Period

1050.00

Memo Item

SEE ALSO MEMO ITEM LISTED ON SCHEDULE E (TRANSACTION ID: SE24.82883)

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement
COMPLIANCE SOFTWARE FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 26 / 2016

Transaction ID : **SB21B.I83964**

Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement
COMPLIANCE SOFTWARE FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 26 / 2016

Transaction ID : **SB21B.I83965**

Amount of Each Disbursement this Period: 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DEMANDVOICE, LLC

Mailing Address 11555 MEDLOCK BRIDGE RD.
SUITE 100

City JOHNS CREEK State GA Zip Code 30097

Purpose of Disbursement
CAREY ACCOUNT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 04 / 2016

Transaction ID : **SB21B.I83947**

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. EFUNDRAISING CONNECTIONS

Mailing Address 2131 CAPITOL AVE
SUITE 306

City SACRAMENTO State CA Zip Code 95816

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2016

Transaction ID : **SB21B.I83942**

Amount of Each Disbursement this Period

1575.41

Memo Item

Full Name (Last, First, Middle Initial)

B. ELAVON INC.

Mailing Address TWO CONCOURSE PARKWAY
SUITE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : **SB21B.I83949**

Amount of Each Disbursement this Period

2416.07

Memo Item

Full Name (Last, First, Middle Initial)

C. ELAVON INC.

Mailing Address TWO CONCOURSE PARKWAY
SUITE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : **SB21B.I83950**

Amount of Each Disbursement this Period

50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4041.48

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. ELAVON INC.

Mailing Address TWO CONCOURSE PARKWAY
SUITE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 18 / 2016

Transaction ID : **SB21B.I83951**

Amount of Each Disbursement this Period: 25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ELAVON INC.

Mailing Address TWO CONCOURSE PARKWAY
SUITE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 20 / 2016

Transaction ID : **SB21B.I83952**

Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ELAVON INC.

Mailing Address TWO CONCOURSE PARKWAY
SUITE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 22 / 2016

Transaction ID : **SB21B.I83953**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. ELAVON INC.

Date of Disbursement: MM / DD / YYYY
04 / 25 / 2016

Mailing Address: TWO CONCOURSE PARKWAY
SUITE 800

City: ATLANTA State: GA Zip Code: 30328

Purpose of Disbursement: PAYMENT PROCESSING FEES

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I83954**

Amount of Each Disbursement this Period: 10.00

Memo Item

Full Name (Last, First, Middle Initial)
B. ELAVON INC.

Date of Disbursement: MM / DD / YYYY
04 / 27 / 2016

Mailing Address: TWO CONCOURSE PARKWAY
SUITE 800

City: ATLANTA State: GA Zip Code: 30328

Purpose of Disbursement: PAYMENT PROCESSING FEES

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I83955**

Amount of Each Disbursement this Period: 50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. POLITICAL LIST BROKERS LLC

Date of Disbursement: MM / DD / YYYY
04 / 12 / 2016

Mailing Address: 107 S WEST ST
PMB 826

City: ALEXANDRIA State: VA Zip Code: 22314-2824

Purpose of Disbursement: DATA SERVICING FEE

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.I83962**

Amount of Each Disbursement this Period: 4857.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4917.74

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. SAME DAY PROCESSING

Mailing Address 7300 HUDSON BLVD N
STE 240

City ST. PAUL State MN Zip Code 55128

Purpose of Disbursement
CAREY ACCOUNT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : **SB21B.I83948**

Amount of Each Disbursement this Period

1630.15

Memo Item

Full Name (Last, First, Middle Initial)

B. TRANSAXT

Mailing Address 190 MONROE AVENUE NW
SUITE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 30 / 2016

Transaction ID : **SB21B.I84545**

Amount of Each Disbursement this Period

1069.57

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2699.72

25258.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83744
City NEW YORK	State NY	
Purpose of Disbursement EARMARKED CONTRIBUTION FROM JEAN HARRINGTON		Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83745
City NEW YORK	State NY	
Purpose of Disbursement EARMARKED CONTRIBUTION FROM MARK ROGERS		Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83746
City NEW YORK	State NY	
Purpose of Disbursement EARMARKED CONTRIBUTION FROM BRIAN BABYAK		Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83747
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement EARMARKED CONTRIBUTION FROM JAMES COLEMON	Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83748
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement EARMARKED CONTRIBUTION FROM ELIZABETH DUBUQUE	Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83749
City NEW YORK	State NY	
Zip Code 10022	Purpose of Disbursement EARMARKED CONTRIBUTION FROM KEVIN SPRING	Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM NGOC TRAN

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83750**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DAYNE POPA

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83751**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM COTTON ROHRSCHEIB

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83752**

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **15.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial) A. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83753
City NEW YORK	State NY	
Purpose of Disbursement EARMARKED CONTRIBUTION FROM CAROLE SEIFERT		Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83754
City NEW YORK	State NY	
Purpose of Disbursement EARMARKED CONTRIBUTION FROM WILLIAM HEPBURN		Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DONALD J. TRUMP FOR PRESIDENT, INC.		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 725 FIFTH AVENUE		Transaction ID : SB23.I83755
City NEW YORK	State NY	
Purpose of Disbursement EARMARKED CONTRIBUTION FROM RHEA HACKLER		Amount of Each Disbursement this Period 5.00
Candidate Name DONALD J. TRUMP		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LYNDA HAYNES

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼

State: District:

Transaction ID : **SB23.I83756**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARJPRIE BYRNES

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼

State: District:

Transaction ID : **SB23.I83757**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN PORTIK

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼

State: District:

Transaction ID : **SB23.I83758**

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM TAMMY CAMPAGNA

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : **SB23.I83759**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JACK HOLM

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : **SB23.I83760**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM RICHARD VENEMA

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : **SB23.I83761**

Amount of Each Disbursement this Period

5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83762

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM BARBARA R RAWLS

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83763

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ERIK HANSON

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83764

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOSEPH BRUNNER

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83765

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM FAITH DUNN

Category/ Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83766

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KIM PODOLL

Category/ Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83767

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MANUEL KING

Category/ Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MIKE PULKE

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83768**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARLEITA MARLETT

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83769**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ANDY FURNISS

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83770**

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **15.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83771

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM XIAOQI WANG

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83772

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM TAMMY FAIR

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83773

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DAVID MATTOS

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement: / /

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement **EARMARKED CONTRIBUTION FROM WHITNEY TOMPKINS**

Candidate Name **DONALD J. TRUMP** Category/Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Amount of Each Disbursement this Period:
 Memo Item

Transaction ID : **SB23.I83774**

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement: / /

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement **EARMARKED CONTRIBUTION FROM ROBERT VOELLER**

Candidate Name **DONALD J. TRUMP** Category/Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Amount of Each Disbursement this Period:
 Memo Item

Transaction ID : **SB23.I83775**

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement: / /

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement **EARMARKED CONTRIBUTION FROM BRIAN HOLLAND**

Candidate Name **DONALD J. TRUMP** Category/Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Amount of Each Disbursement this Period:
 Memo Item

Transaction ID : **SB23.I83776**

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83777

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DAVID WILSON

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83778

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM EVA HOGARD

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83779

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM INGE WAGNER

Category/ Type

Candidate Name

DONALD J. TRUMP

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM STEPHEN CHAMBERS

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83780**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CLIFFORD MCLEAN

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83781**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM ROBERT BLUESTONE

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83782**

Amount of Each Disbursement this Period

5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MORDECHAY FELDMAN

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : **SB23.I83783**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM PAMELA PULLEN

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : **SB23.I83784**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM PETER HORWOOD

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : **SB23.I83785**

Amount of Each Disbursement this Period

5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JONAS SANCHEZ

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : SB23.I83786

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CARLOS HERMIDA

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : SB23.I83787

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CORNELIA NOEL

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : SB23.I83788

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **15.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83789

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM PEARL PATTERSON

Category/Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83790

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LINDA HARMON

Category/Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83791

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KATHERINE WIEBENGA

Category/Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MICHAEL BARKHAUS

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83792**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MICHAEL WOOD

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83793**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM FERNANDO SOLIS

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83794**

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **15.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83795

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MARTIN O HOPPE

Category/ Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83796

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM WENDY MANGRUM

Category/ Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83797

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM BRAD JAWORSKI

Category/ Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MICHELLE MURRELL

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Transaction ID : **SB23.I83798**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JOHN PARR

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Transaction ID : **SB23.I83799**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM SUSAN BURKE

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Transaction ID : **SB23.I83800**

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LISA KOHANE

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83801**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CHARLES FREDERICK

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83802**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM MEGAN THORNTON

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : **SB23.I83803**

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **15.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM PANOS DOUKIDESM.D.

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼

State: District:

Transaction ID : **SB23.I83804**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CLEMENS MANDEL

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼

State: District:

Transaction ID : **SB23.I83805**

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM VIRGINIA MACHA

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼

State: District:

Transaction ID : **SB23.I83806**

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM KENNETH FIX

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB23.I83807**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM JASON THOMAS

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB23.I83808**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address 725 FIFTH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM WENDY HARING

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: District: Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB23.I83809**

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83810

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM LORI BEARD

Category/Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83811

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CHRIS STEWART

Category/Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. DONALD J. TRUMP FOR PRESIDENT, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 725 FIFTH AVENUE

Transaction ID : SB23.I83812

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM GERTRUDE CAMPBELL

Category/Type

Candidate Name

DONALD J. TRUMP

Memo Item

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)
A. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DORIS TURLO

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : SB23.I83813

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM G M MAHANKE

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : SB23.I83814

Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DONALD J. TRUMP FOR PRESIDENT, INC.

Mailing Address **725 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10022**

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM CHARLES KELECIC

Candidate Name
DONALD J. TRUMP

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2016

Transaction ID : SB23.I83815

Amount of Each Disbursement this Period
5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **15.00**

TOTAL This Period (last page this line number only)..... ▶ **360.00**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GREAT AMERICA PAC

Full Name (Last, First, Middle Initial)

A. TRANSAXT

Mailing Address 190 MONROE AVENUE NW
SUITE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
CAREY ACCOUNT - PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 30 / 2016

Transaction ID : **SB29.I83943**

Amount of Each Disbursement this Period

30.65

Memo Item

Full Name (Last, First, Middle Initial)

B. TRANSAXT

Mailing Address 190 MONROE AVENUE NW
SUITE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
CAREY ACCOUNT - PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 30 / 2016

Transaction ID : **SB29.I83944**

Amount of Each Disbursement this Period

150.86

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

181.51

181.51

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **GREAT AMERICA PAC** Transaction ID : **SC.83960**

LOAN SOURCE Full Name (Last, First, Middle Initial) Eric Beach	<input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Carey Acct: Loan		
Mailing Address 344 E 16th Street		
City Costa Mesa State CA ZIP Code 92627		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS

Date Incurred: MM / DD / YYYY (04 / 21 / 2016) Date Due: MM / DD / YYYY (On Demand) Interest Rate: 0.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	50000.00
TOTALS This Period (last page in this line only)..... ▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **GREAT AMERICA PAC** Transaction ID : **SC.83191**

LOAN SOURCE Full Name (Last, First, Middle Initial) GOLDENWEST DIAMOND CORPORATION CAREY ACCOUNT LOAN	<input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 15732 TUSTIN VILLAGE WAY		
City TUSTIN	State CA	ZIP Code 92780-4924

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 03 / 17 / 2016	MM / DD / YYYY on demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	250000.00
TOTALS This Period (last page in this line only).....▶	300000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) GREAT AMERICA PAC	FEC IDENTIFICATION NUMBER ▼ C C00608489
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee ADVICTORY <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 19 / 2016
Mailing Address 190 MONROE AVE SUITE 500	Amount 500.00
City State Zip Code GRAND RAPIDS MI 49503	Transaction ID : SE24.82883 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 19 / 2016
Purpose of Expenditure ONLINE ADVERTISING - NATIONALLY DISTRIBUTED	Category/Type
Name of Federal Candidate DONALD J. TRUMP	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought 795844.41	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Convention

Full Name of Payee ELEVENTY MARKETING GROUP, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 26 / 2016
Mailing Address 453 S HIGH ST SUITE 101	Amount 10000.00
City State Zip Code AKRON OH 44311	Transaction ID : SE24.83818 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 25 / 2016
Purpose of Expenditure ONLINE ADVERTISING - NATIONALLY DISTRIBUTED	Category/Type
Name of Federal Candidate DONALD J. TRUMP	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought 795844.41	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Convention

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	10000.00
(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.

DAN BACKER [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
 04 / 19 / 2016
 Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) GREAT AMERICA PAC
FEC IDENTIFICATION NUMBER C C00608489
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee GOOGLE INC.
Mailing Address 1600 AMPHITHEATRE PKWY DEPARTMENT NO 33654
City MOUNTAIN VIEW State CA Zip Code 94043
Purpose of Expenditure ONLINE ADVERTISING - NATIONALLY DISTRIBUTED
Name of Federal Candidate DONALD J. TRUMP
Calendar Year-To-Date Per Election for Office Sought 795844.41
Date of Public Distribution/Dissemination 04/19/2016
Amount 5000.00
Transaction ID : SE24.82882
Date of Disbursement or Obligation 04/19/2016
Office Sought: President
Disbursement For: Other (specify) Convention

Full Name of Payee NOVA LIST COMPANY
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300
City ASHBURN State VA Zip Code 20147
Purpose of Expenditure LIST PURCHASE
Name of Federal Candidate DONALD J. TRUMP
Calendar Year-To-Date Per Election for Office Sought 3690.00
Date of Public Distribution/Dissemination 05/20/2016
Amount 3690.00
Transaction ID : SE24.83875
Date of Disbursement or Obligation 04/27/2016
Office Sought: President
Disbursement For: General

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures 3690.00. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (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.

DAN BACKER [Electronically Filed] Date 04/19/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) GREAT AMERICA PAC
FEC IDENTIFICATION NUMBER C C00608489
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee POLITICAL LIST BROKERS LLC
Mailing Address 107 S WEST ST PMB 826
City ALEXANDRIA State VA Zip Code 22314-2824
Purpose of Expenditure APRIL DIGITAL DEPLOYMENT COSTS - NATIONALLY DISTRIBUTED
Name of Federal Candidate DONALD J. TRUMP
Calendar Year-To-Date Per Election for Office Sought 795844.41
Date of Public Distribution/Dissemination 04/07/2016
Amount 10000.00
Transaction ID : SE24.82601
Date of Disbursement or Obligation 04/07/2016
Office Sought: President
Disbursement For: Other (specify) Convention

Full Name of Payee RAPID RESPONSE TELEVISION LLC
Mailing Address 4850 WRIGHT ROAD
City STAFFORD State TX Zip Code 77477
Purpose of Expenditure TELEVISION ADVERTISEMENT - NATIONALLY DISTRIBUTED
Name of Federal Candidate DONALD J. TRUMP
Calendar Year-To-Date Per Election for Office Sought 795844.41
Date of Public Distribution/Dissemination 04/11/2016
Amount 25000.00
Transaction ID : SE24.83211
Date of Disbursement or Obligation 04/07/2016
Office Sought: President
Disbursement For: Other (specify) Convention

(a) SUBTOTAL of Itemized Independent Expenditures 35000.00
(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.
Signature DAN BACKER [Electronically Filed] Date 04/08/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) GREAT AMERICA PAC	FEC IDENTIFICATION NUMBER ▼ C C00608489
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee RAPID RESPONSE TELEVISION LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 18 / 2016
Mailing Address 4850 WRIGHT ROAD	Amount 20500.00
City State Zip Code STAFFORD TX 77477	Transaction ID : SE24.83212 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 14 / 2016
Purpose of Expenditure TELEVISION ADVERTISEMENT - NATIONALLY DISTRIBUTED	Category/Type
Name of Federal Candidate DONALD J. TRUMP	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 795844.41	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Convention

Full Name of Payee RAPID RESPONSE TELEVISION LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 18 / 2016
Mailing Address 4850 WRIGHT ROAD	Amount 4500.00
City State Zip Code STAFFORD TX 77477	Transaction ID : SE24.83978 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 14 / 2016
Purpose of Expenditure TELEVISION ADVERTISEMENT	Category/Type
Name of Federal Candidate DONALD J. TRUMP	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought 12700.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	25000.00
(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.

DAN BACKER

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) GREAT AMERICA PAC	FEC IDENTIFICATION NUMBER ▼ C C00608489
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee RAPID RESPONSE TELEVISION LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2016
Mailing Address 4850 WRIGHT ROAD	Amount 15000.00
City State Zip Code STAFFORD TX 77477	Transaction ID : SE24.83817 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 22 / 2016
Purpose of Expenditure TELEVISION ADVERTISEMENT - NATIONALLY DISTRIBUTED	Category/Type
Name of Federal Candidate DONALD J. TRUMP	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 795844.41	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Convention

Full Name of Payee REVILY INC. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 22 / 2016
Mailing Address 3436 MILLER DR.	Amount 8875.00
City State Zip Code ATLANTA GA 30341	Transaction ID : SE24.83816 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2016
Purpose of Expenditure VOTER CONTACT CALLS - NATIONALLY DISTRIBUTED	Category/Type
Name of Federal Candidate DONALD J. TRUMP	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 795844.41	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Convention

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	23875.00
(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.

DAN BACKER [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) GREAT AMERICA PAC	FEC IDENTIFICATION NUMBER ▼ C C00608489
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee TITAN STRATEGIES LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 18 / 2016
Mailing Address 4003 WOODSTONE WAY	Amount 8200.00
City State Zip Code LOUISVILLE KY 40241	Transaction ID : SE24.83961
Purpose of Expenditure VIDEO PRODUCTION	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 01 / 2016
Name of Federal Candidate DONALD J. TRUMP	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NY Office Sought: <input type="checkbox"/> House District: _____
Calendar Year-To-Date Per Election for Office Sought 12700.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Office Sought: <input type="checkbox"/> House District: _____
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	8200.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	105765.00

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.

Signature DAN BACKER [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 18 / 2016