24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
GREAT AMERICA PÁC		
	C C00608489	
Check if 24-hour report		
Full Name of Payee	Date of Public Distribution/Dissemination	
BRILLIANT COMMUNICATIONS	09 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 9305 SCHUBERT COURT	Amount	
City State Zip Code	20000.00	
VIENNA VA 22182	Transaction ID : SE24.105490 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED SEPTEMBER MAIL VOTER CONTACT Category/ Type	09 01 2017	
Name of Federal Candidate Support Office	e Sought: House District:	
TRUMP, DONALD, J, , Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbrace 2020	ursement For: Primary X General Other (specify) ▶	
Full Name of Payee CAMPAIGN SOLUTIONS	Date of Public Distribution/Dissemination	
Mailing Address 117 N SAINT ASAPH ST	09 01 2017	
Mailing Address 117 N SAINT ASAPH ST	Amount	
City State Zip Code	50000.00	
ALEXANDRIA VA 22314	Transaction ID : SE24.105491 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED SEPTEMBER ONLINE VOTER CONTACT Category/ Type	09 / 01 / 2017	
Name of Federal Candidate Support Offic	ee Sought: House District:	
TRUMP, DONALD, J, , Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disb 2020	oursement For: Primary General O Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	70000.00	
(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.		
24.0	08 30 2017	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 4 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
GREAT AMERICA PAC	C C00608489	
Check if 24-hour report 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y	
Full Name of Payee	Date of Public Distribution/Dissemination	
CAMPAIGN SOLUTIONS	09 01 2017	
Mailing Address 117 N SAINT ASAPH ST	Amount	
City State Zip Code	70000.00	
ALEXANDRIA VA 22314	Transaction ID : SE24.105492 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED SEPTEMBER LIST RENTAL FEES Category/ Type	09 / 01 / 2017	
Name of Federal Candidate Support Office	Sought: House District:	
TRUMP, DONALD, J, ,	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbur 2020	sement For: Primary X General Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
CAMPAIGN SOLUTIONS	09	
Mailing Address 117 N SAINT ASAPH ST	Amount	
City State Zip Code	40000.00	
ALEXANDRIA VA 22314	Transaction ID : SE24.105493 Date of Disbursement or Obligation	
Purpose of Expenditure ESTIMATED SEPTEMBER ONLINE DISTRIBUTION COSTS Category/ Type	09 / D1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate	Sought: House District:	
TRUMP DONALD .I	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	rsement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	110000.00	
	7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Backer, Dan, , , [Electronically Filed] Date 08		

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

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
GREAT AMERICA PAC	C C00608489
	U
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
CONNELL DONATELLI, INC.	09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. BOX 1877	Amount
City State Zip Code	1000.00
ALEXANDRIA VA 22313	Transaction ID : SE24.105494 Date of Disbursement or Obligation
Purpose of Expenditure ESTIMATED SEPTEMBER ONLINE VOTER CONTACT Category/ Type	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
TRUMP, DONALD, J, ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	orsement For: Primary General Other (specify) ■
Full Name of Payee	Date of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORPORATION	09 01 2017
Mailing Address P.O. BOX 932441	Amount
City.	5000 00
City State Zip Code CLEVELAND OH 44193	50000.00 Transaction ID : SE24.105495
Purpose of Evpanditure	Date of Disbursement or Obligation
ESTIMATED SEPTEMBER PHONE VOTER CONTACT Category/ Type	09 / 01 / 2017
	e Sought: House District:
TRUMP, DONALD, J, ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	51000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
	8 30 2017
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
GREAT AMERICA PAC	C C00608489
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Da	te of Public Distribution/Dissemination
POLITICAL LIST BROKERS, LLC	09 01 2017
Mailing Address 107 S. WEST ST PMB 826	nount
City State Zip Code	10000.00
ALEXANDRIA VA 22314 Tra	ansaction ID : SE24.105496 tte of Disbursement or Obligation
Purpose of Expenditure ESTIMATED SEPTEMBER ONLINE VOTER CONTACT Category/ Type	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate X Support Office Sou	ught: House District:
TRUMP DONALD I	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursen 2020	nent For: Primary
Full Name of Payee Da	ate of Public Distribution/Dissemination
Mailing Address An	nount
City State Zip Code	
Purpose of Expenditure Category/ Type	ate of Disbursement or Obligation
Name of Federal Candidate Support Oppose Pre	ught: House District:
Calendar Year-To-Date Per Election for Office Sought Disbursen	
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	241000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Backer, Dan, , , [Electronically Filed] Date 08	30 2017
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