

**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

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00608489

3. IS THIS REPORT

☐

NEW (N)

OR

☒

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)☐ 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 M /

D D D /

Y Y 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 M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Backer, Dan, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Backer, Dan, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GREAT AMERICA PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
05		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
05		31		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
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colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><t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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. 05/2016)

Page 3

Write or Type Committee Name

GREAT AMERICA PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
05 / 01 / 2016

To:

M M / D D / Y Y Y Y Y  
05 / 31 / 2016
**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).....

106770.00

173804.00

(ii) Unitemized .....

445906.70

989330.22

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

552676.70

1163134.22

(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) .....

552676.70

1163134.22

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

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).....

18.64

3704.19

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

885318.88

1037763.38

## 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)) .....

1438014.22

2504601.79

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

1438014.22

2504601.79

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	65706.60	100621.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	65706.60	100621.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	6234.00
24. Independent Expenditures (use Schedule E) .....	877530.59	1729915.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	928.01	998.01
(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)).....	928.01	998.01
29. Other Disbursements (Including Non-Federal Donations).....	58114.10	165861.61
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	1002279.30	2003630.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1002279.30	2003630.55

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	552676.70	1163134.22
34. Total Contribution Refunds (from Line 28(d)) .....	928.01	998.01
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	551748.69	1162136.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	65706.60	100621.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	18.64	3704.19
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	65687.96	96917.74

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: F3XA  
Transaction ID :

This report amended to correct the disbursement date for an expenditure on Schedule E, and to add a corresponding entry on Schedule D.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ACAMPORA, ROSEMARY, , ,**

Mailing Address 21650 MALIBU AVE

City  
PRIOR LAKE

State  
MN

Zip Code  
55372-8757

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 12 / 2016

Transaction ID : SA11A.286824

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AERNANDEZ, CARMEN, , ,**

Mailing Address 8 CALLE PALMERAS

City

HUMACAO

State

PR

Zip Code

00791-6000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : SA11A.287461

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ALLEN, JUDITH, , ,**

Mailing Address 2041 FRANSWORTH DR.

City

NASHVILLE

State

TN

Zip Code

37205-2701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : SA11A.289357

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

650.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ANDERSON, GAIL, , ,**

Mailing Address **416 UNION AVENUE**

City  
**SARATOGA SPRINGS**

State  
**NY**

Zip Code  
**12866-6422**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1450.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA11A.289928**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ANDERSON, GAIL, , ,**

Mailing Address **416 UNION AVENUE**

City  
**SARATOGA SPRINGS**

State  
**NY**

Zip Code  
**12866-6422**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1450.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA11A.307760**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ANTON, FRANCINE, , ,**

Mailing Address **18026 PETTY LANE**

City  
**SPRING LAKE**

State  
**MI**

Zip Code  
**49456-1527**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA11A.307910**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**1200.00**

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ARNETTE, SHANNON, , ,**

Mailing Address **81 GREY ROCK DR.**

City <b>MIDLAND</b>	State <b>GA</b>	Zip Code <b>31820-4706</b>
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA11A.287338**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ASTON, HARRY, , ,**

Mailing Address **4810 FIREWHEEL DR.**

City <b>GARLAND</b>	State <b>TX</b>	Zip Code <b>75044-5109</b>
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286331**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ASTON, HARRY, , ,**

Mailing Address **4810 FIREWHEEL DR.**

City <b>GARLAND</b>	State <b>TX</b>	Zip Code <b>75044-5109</b>
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA11A.290903**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**650.00**

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BAKEWELL, LEE, , ,**

Mailing Address **6227 ORTO VASO AVE**

City  
**LAS VEGAS**

State  
**NV**

Zip Code  
**89131-3148**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286559**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BARNES, GALEN, , ,**

Mailing Address **2011 GULF SHORE BLVD. N. APT. 51**

City  
**NAPLES**

State  
**FL**

Zip Code  
**34102-4632**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA11A.308231**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BARNETTE, MILDRED, , ,**

Mailing Address **202 SUMMERLAND CT**

City  
**HAZEL GREEN**

State  
**AL**

Zip Code  
**35750-7017**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286351**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**700.00**

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

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

FOR LINE NUMBER: PAGE 11 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BARNETTE, MILDRED, , ,**

Mailing Address 202 SUMMERLAND CT

City  
 HAZEL GREEN

State  
 AL

Zip Code  
 35750-7017

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA11A.289887**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BASS, PAUL, , ,**

Mailing Address 1111 S AKARD ST  
 NO 30

City  
 DALLAS

State  
 TX

Zip Code  
 75215-1020

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 04 / 2016**

**Transaction ID : SA11A.284352**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BASS, PAUL, , ,**

Mailing Address 1111 S AKARD ST  
 NO 30

City  
 DALLAS

State  
 TX

Zip Code  
 75215-1020

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286539**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

275.00

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

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

FOR LINE NUMBER: PAGE 12 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BAUSTE, PAM, , ,**

Mailing Address 15224 40TH ST NW

City  
 WILLISTON

State  
 ND

Zip Code  
 58801-8678

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2016

Transaction ID : SA11A.289995

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BAUSTE, PAM, , ,**

Mailing Address 15224 40TH ST NW

City  
 WILLISTON

State  
 ND

Zip Code  
 58801-8678

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2016

Transaction ID : SA11A.290443

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BAYS, RUTH, , ,**

Mailing Address P.O. BOX 160

City  
 PRIEST RIVER

State  
 ID

Zip Code  
 83856-0160

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2016

Transaction ID : SA11A.286252

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

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

350.00

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 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BAYS, RUTH, , ,**

Mailing Address P.O. BOX 160

City  
PRIEST RIVER

State  
ID

Zip Code  
83856-0160

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : SA11A.287395

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BEARD, SELINA, , ,**

Mailing Address 4281 CAMPBELL RD

City  
WAPATO

State  
WA

Zip Code  
98951-9714

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 27 / 2016

Transaction ID : SA11A.292660

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BECK, EDWIN, , ,**

Mailing Address 22612 107TH AVE NE

City  
ARLINGTON

State  
WA

Zip Code  
98223-9501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 27 / 2016

Transaction ID : SA11A.290600

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

900.00

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

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

FOR LINE NUMBER: PAGE 14 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BERKELEY, CHRISTINE, , ,**

Mailing Address 15555 WINDFALL DR.

City  
ONANCOCK

State  
VA

Zip Code  
23417-3521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286266**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BESSOLO, JOHN, , ,**

Mailing Address 13386 CENTERVILLE RD

City  
CHICO

State  
CA

Zip Code  
95928-8326

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA11A.285546**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BINDER, ADELE, , ,**

Mailing Address 225 SOUTH LAKE ST. SUITE 300

City  
PASADENA

State  
CA

Zip Code  
91101-3009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA11A.307594**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

700.00

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

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

FOR LINE NUMBER: PAGE 15 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BLAKEMAN, JUDY, , ,**

Mailing Address 609 MONTICELLO DR.

City  
FORT WORTH

State  
TX

Zip Code  
76107-2048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 11 / 2016

Transaction ID : SA11A.286343

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOGNER, RICHARD, , ,**

Mailing Address 4 HUNTERS LANE

City  
ROSLYN

State  
NY

Zip Code  
11576-1306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

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  
05 / 07 / 2016

Transaction ID : SA11A.307637

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BONDOUX, KATHRYN, , ,**

Mailing Address 5856 SOUTH LOWELL BLVD #32-301

City  
LITTLETON

State  
CO

Zip Code  
80123-7915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

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  
05 / 13 / 2016

Transaction ID : SA11A.307906

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

550.00

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 16 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOONE, MICHAEL, , ,**

Mailing Address 211 8TH ST E

City  
 TIERRA VERDE

State  
 FL

Zip Code  
 33715-2248

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA11A.286939**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOYCE, SANDRA, , ,**

Mailing Address 437 WHISKEY HILL RD

City  
 WOODSIDE

State  
 CA

Zip Code  
 94062-2535

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

SELF

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **06** / **2016**

**Transaction ID : SA11A.307615**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BRIDGES, STEVE, , ,**

Mailing Address 995 ACAPULCO STREET

City  
 LAGUNA BEACH

State  
 CA

Zip Code  
 92651-3803

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

Q10 | WESTCAP

Occupation (for Individual)

COMMERCIAL MORTGAGE BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **15** / **2016**

**Transaction ID : SA11A.307920**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2200.00



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

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

FOR LINE NUMBER: PAGE 17 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BRITTON, LYNDIA, , ,**

Mailing Address 9913 LAKE SHORE BLVD

City  
CLEVELAND

State  
OH

Zip Code  
44108-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2016

Transaction ID : SA11A.283884

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BRITTON, LYNDIA, , ,**

Mailing Address 9913 LAKE SHORE BLVD

City  
CLEVELAND

State  
OH

Zip Code  
44108-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : SA11A.287556

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BROCHOLD, PETER, , ,**

Mailing Address 1978 CUNNINGHAM CT

City  
GRAND JUNCTION

State  
CO

Zip Code  
81507-9561

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : SA11A.288992

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 18 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BROCHOLD, PETER, , ,**

Mailing Address 1978 CUNNINGHAM CT

City  
 GRAND JUNCTION

State  
 CO

Zip Code  
 81507-9561

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2016

Transaction ID : SA11A.308595

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **BROCHU, ROBERT, , ,**

Mailing Address 505 SAND CRANE CT

City  
 BRADENTON

State  
 FL

Zip Code  
 34212-6203

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 04 / 2016

Transaction ID : SA11A.284441

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **BROWN, ROBERT, , ,**

Mailing Address 250B 240TH ST

City  
 OSCEOLA

State  
 WI

Zip Code  
 54020-5903

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2016

Transaction ID : SA11A.286221

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

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

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

900.00

# **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 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BROWN, ROBERT, , ,**

Mailing Address 250B 240TH ST

City  
 OSCEOLA

State  
 WI

Zip Code  
 54020-5903

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA11A.289836**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CAPPS, GEORGE, , ,**

Mailing Address 5194 US HIGHWAY 80 W

City  
 OPELIKA

State  
 AL

Zip Code  
 36804-1883

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA11A.290597**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CARAWAN, PHILLIP, , ,**

Mailing Address 16301 US HIGHWAY 264

City  
 SWANQUARTER

State  
 NC

Zip Code  
 27885-9413

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA11A.287557**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1150.00

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

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

FOR LINE NUMBER: PAGE 20 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. **CARDWELL, JAMES, , ,**

Mailing Address 1430 RIVER OVERLOOK LOOP

City  
 VAN BUREN

State  
 AR

Zip Code  
 72956-8358

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2016

Transaction ID : SA11A.290224

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **CARL, WILLIAM, , ,**

Mailing Address 5207 KIAM ST

City  
 HOUSTON

State  
 TX

Zip Code  
 77007-1214

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 27 / 2016

Transaction ID : SA11A.290601

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **CHERRYHOLMES, DAVID, , ,**

Mailing Address 6640 OLD MEXIA RD

City  
 WACO

State  
 TX

Zip Code  
 76705-4932

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 27 / 2016

Transaction ID : SA11A.292665

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

4500.00

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

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

FOR LINE NUMBER: PAGE 21 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CHRISTOFFERSON, JUNE, , ,**

Mailing Address P.O. BOX 527

City  
**MERRILL**

State  
**OR**

Zip Code  
**97633-0527**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA11A.292026**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHURCHWELL, DIANE N, , ,**

Mailing Address 2009 FM 950

City

**EAGLE LAKE**

State

**TX**

Zip Code

**77434-7063**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 05 / 2016**

**Transaction ID : SA11A.284834**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CLAPP, MACIE, , ,**

Mailing Address 2118 ANTIBES DR.

City

**CARROLLTON**

State

**TX**

Zip Code

**75006-4326**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**RETIRED**

Occupation (for Individual)

**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286350**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**400.00**

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

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

FOR LINE NUMBER: PAGE 22 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CLAPP, MACIE, , ,**

Mailing Address 2118 ANTIBES DR.

City  
 CARROLLTON

State  
 TX

Zip Code  
 75006-4326

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05** / **16** / **2016**

Transaction ID : **SA11A.287260**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CLAPP, MACIE, , ,**

Mailing Address 2118 ANTIBES DR.

City  
 CARROLLTON

State  
 TX

Zip Code  
 75006-4326

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05** / **25** / **2016**

Transaction ID : **SA11A.292415**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CLARKE, JAMES, , ,**

Mailing Address P.O. BOX 675687

City  
 RANCHO SANTA FE

State  
 CA

Zip Code  
 92067-5687

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **10** / **2016**

Transaction ID : **SA11A.285713**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1150.00

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

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

FOR LINE NUMBER: PAGE 23 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CLINE, DALE K, , ,**

Mailing Address 870 18TH AVE CT NW

City  
**HICKORY**

State  
**NC**

Zip Code  
**28601-1271**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF-EMPLOYED**

Occupation (for Individual)  
**CERTIFIED PUBLIC ACCOUNTANT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**2500.00**

Date of Receipt

**05 / 05 / 2016**

**Transaction ID : SA11A.307500**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. COOLLEY, ANN, , ,**

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 (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA11A.292423**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CORMIER, JANE, , ,**

Mailing Address 6508 MT. SHASTA DR.

City  
**BAKERSFIELD**

State  
**CA**

Zip Code  
**93309-2443**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**THREE-WAY CHEVROLET**

Occupation (for Individual)  
**OWNER CAR DEALERSHIP**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA11A.307996**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**2850.00**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 389

(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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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**Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CRAFT, WILMA, , ,**

Mailing Address 129 FRANKLIN DR.

City  
VOORHEESState  
NJZip Code  
08043-2117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	D D	Y Y Y Y
05	04	2016

Transaction ID : SA11A.284495

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CRAWFORD, SHARON, , ,**

Mailing Address P.O. BOX 155535

City  
LUFKINState  
TXZip Code  
75915-5535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
05	06	2016

Transaction ID : SA11A.285439

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CURLESS, REBECCA, , ,**

Mailing Address 208 N LINE ST

City  
COLUMBIA CITYState  
INZip Code  
46725-2014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	D D	Y Y Y Y
05	27	2016

Transaction ID : SA11A.290593

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

550.00



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

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

FOR LINE NUMBER: PAGE 25 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CURTIS, CAROL, , ,**

Mailing Address 285 LITTLE ANDORRA RD

City  
EDWARDS

State  
CO

Zip Code  
81632-6256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 04 / 2016

Transaction ID : SA11A.284319

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CURTIS, CAROL, , ,**

Mailing Address 285 LITTLE ANDORRA RD

City  
EDWARDS

State  
CO

Zip Code  
81632-6256

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 20 / 2016

Transaction ID : SA11A.289717

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DANE, KRIS, , ,**

Mailing Address P.O. BOX 865

City  
SHERIDAN

State  
WY

Zip Code  
82801-0865

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

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

Transaction ID : SA11A.284945

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1200.00

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

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

FOR LINE NUMBER: PAGE 26 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. DANE, KRIS, , ,</b>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 05 / 05 / 2016</div> </div> <b>Transaction ID : SA11A.285013</b>		
Mailing Address <b>P.O. BOX 865</b>			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">10.00</div>		
City <b>SHERIDAN</b>	State <b>WY</b>	Zip Code <b>82801-0865</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">1110.00</div>		
Name of Employer (for Individual) <b>INFORMATION REQUESTED PER BEST EFFORTS</b>			Occupation (for Individual) <b>INFORMATION REQUESTED PER BE</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">1110.00</div>		

  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. DANE, KRIS, , ,</b>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 05 / 05 / 2016</div> </div> <b>Transaction ID : SA11A.285052</b>		
Mailing Address <b>P.O. BOX 865</b>			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">100.00</div>		
City <b>SHERIDAN</b>	State <b>WY</b>	Zip Code <b>82801-0865</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">1110.00</div>		
Name of Employer (for Individual) <b>INFORMATION REQUESTED PER BEST EFFORTS</b>			Occupation (for Individual) <b>INFORMATION REQUESTED PER BE</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">1110.00</div>		

  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. DAVIDSON, KENNETH, , ,</b>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 05 / 13 / 2016</div> </div> <b>Transaction ID : SA11A.307909</b>		
Mailing Address <b>2030 FOSTORIA CIRCLE</b>			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>		
City <b>DANVILLE</b>	State <b>CA</b>	Zip Code <b>94526-5557</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>		
Name of Employer (for Individual) <b>NONE</b>			Occupation (for Individual) <b>SELF-EMPLOYED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>		

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<div style="border: 1px solid black; padding: 2px; text-align: right;">360.00</div>
<b>TOTAL</b> This Period (last page this line number only).....	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>

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

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

FOR LINE NUMBER: PAGE 27 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DEATON, CHARLES, , ,**

Mailing Address **P.O. BOX 2042**

City  
**BURLINGTON**

State  
**NC**

Zip Code  
**27216-2042**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**NC ORTHOCORP INC.**

Occupation (for Individual)  
**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 28 / 2016**

**Transaction ID : SA11A.308314**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DOGRUL, HASAN, , ,**

Mailing Address **4402 NUTTALL RD**

City  
**FAIRFAX**

State  
**VA**

Zip Code  
**22032-3627**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA11A.307861**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DORSEY, LORI, , ,**

Mailing Address **5781 LICKING VALLEY RD SE**

City  
**NASHPORT**

State  
**OH**

Zip Code  
**43830-2500**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA11A.292574**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**950.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DUKE, MEIR, , ,**

Mailing Address 12300 HIGHGROVE CT

City  
REISTERSTOWN

State  
MD

Zip Code  
21136-5670

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **27** / **2016**

**Transaction ID : SA11A.290598**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ECKELBERG, BONNIE, , ,**

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 (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA11A.286302**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FAULKNER, SAM, , ,**

Mailing Address 1564 COUNTY HIGHWAY 725

City  
NEW MADRID

State  
MO

Zip Code  
63869-9163

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **05** / **2016**

**Transaction ID : SA11A.285085**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FAULKNER, SAM, , ,**

Mailing Address 1564 COUNTY HIGHWAY 725

City  
 NEW MADRID

State  
 MO

Zip Code  
 63869-9163

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 17 / 2016

Transaction ID : SA11A.288330

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FISH, DAVID, , ,**

Mailing Address 2658 RIDGE DR.

City  
 HIGH RIDGE

State  
 MO

Zip Code  
 63049-2324

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 05 / 2016

Transaction ID : SA11A.284985

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FITZSIMMONS, JUDY, , ,**

Mailing Address 700 HEMLOCK ST

City  
 IRWIN

State  
 PA

Zip Code  
 15642-3842

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

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  
 05 / 02 / 2016

Transaction ID : SA11A.283864

Amount of Each Receipt this Period

150.00

☐ 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)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FITZSIMMONS, JUDY, , ,**

Mailing Address 700 HEMLOCK ST

City  
 IRWIN

State  
 PA

Zip Code  
 15642-3842

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA11A.290313**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FLOOD, JAMES, , ,**

Mailing Address 110 FOREST GTWY

City

CRYSTAL FALLS

State

MI

Zip Code

49920-8856

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA11A.292071**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FLOWE, THOMPSON, , ,**

Mailing Address 2317 DIAMOND POINTE DR. SE

City

DECATUR

State

AL

Zip Code

35603-5237

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **06** / **2016**

**Transaction ID : SA11A.285451**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2100.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FORD, JOHN, , ,**

Mailing Address 3941 S. BRISTOL STREET D80

City  
 SANTA ANA

State  
 CA

Zip Code  
 92704-7400

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 INSIGHT INVESTMENTS

Occupation (for Individual)  
 CEO

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  
 05 / 16 / 2016

Transaction ID : SA11A.307925

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FORREST, MIKE, , ,**

Mailing Address 8201 SAN DIEGO ST

City  
 ODESSA

State  
 TX

Zip Code  
 79765-8523

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BE

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  
 05 / 19 / 2016

Transaction ID : SA11A.288986

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FOUNTAIN, REGINALD, , ,**

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 (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2016

Transaction ID : SA11A.289718

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

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

1600.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FRAZEE, LEWIS, , ,**

Mailing Address 10770 INWOOD RD

City  
DALLAS

State  
TX

Zip Code  
75229-5454

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.291563**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FRYE, C, , ,**

Mailing Address 5032 OLD VALLEY PIKE

City

NEW MARKET

State

VA

Zip Code

22844-3647

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA11A.292232**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GALLMAN, SANDRA, , ,**

Mailing Address P.O. BOX 232

City

ST.PETERSBURG

State

FL

Zip Code

33731-0232

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

SELF

Occupation (for Individual)

RENTALS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.307791**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00



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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GANN, FRED, , ,**

Mailing Address P.O. BOX 155338

City  
 LUFKIN

State  
 TX

Zip Code  
 75915-5338

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286557**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GIBERT, JOSEPH, , ,**

Mailing Address 201 W LIBERTY ST  
 STE 310

City  
 RENO

State  
 NV

Zip Code  
 89501-2017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA11A.285779**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GILLESPIE, ROSS, , ,**

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 (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

**05 / 05 / 2016**

**Transaction ID : SA11A.284769**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

475.00

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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. GILLESPIE, ROSS, , ,</b></p> <p>Mailing Address P.O. BOX 7310</p> <p>City BECKLEY State WV Zip Code 25802-7310</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2016 <b>Transaction ID : SA11A.287914</b></p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Memo Item CONTRIBUTION</p>	
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. GILLESPIE, ROSS, , ,</b></p> <p>Mailing Address P.O. BOX 7310</p> <p>City BECKLEY State WV Zip Code 25802-7310</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016 <b>Transaction ID : SA11A.291853</b></p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Memo Item CONTRIBUTION</p>	
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. GILLINGHAM, JANET, , ,</b></p> <p>Mailing Address 803 MARION ST</p> <p>City NEW EAGLE State PA Zip Code 15067-1056</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2016 <b>Transaction ID : SA11A.285898</b></p> <p>Amount of Each Receipt this Period 75.00</p> <p><input type="checkbox"/> Memo Item CONTRIBUTION</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>275.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GILLINGHAM, JANET, , ,**

Mailing Address 803 MARION ST

City  
 NEW EAGLE

State  
 PA

Zip Code  
 15067-1056

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA11A.292070**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GLADNEY, WARREN, , ,**

Mailing Address 1270 KELLY CORNER RD

City  
 COVINGTON

State  
 TN

Zip Code  
 38019-8137

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286164**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GLENN, REX, , ,**

Mailing Address 3503 N MONTANA AVE

City  
 ROSWELL

State  
 NM

Zip Code  
 88201-9792

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA11A.291930**

Amount of Each Receipt this Period

400.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

650.00

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

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

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(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRANGE, GORDON, , ,**

Mailing Address 1765 E 1050 N

City  
HEBER CITY

State  
UT

Zip Code  
84032-3405

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 27 / 2016

Transaction ID : SA11A.290592

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GREEN, JOYCE M, , ,**

Mailing Address 705 BLUME DRIVE

City

GALVESTON

State

TX

Zip Code

77554-9115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2016

Transaction ID : SA11A.307399

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRETH, WALTER, , ,**

Mailing Address P.O. BOX 305

City

TEMPLE

State

PA

Zip Code

19560-0305

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

GRETH HOMES

Occupation (for Individual)

HOME BUILDER

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  
05 / 12 / 2016

Transaction ID : SA11A.307827

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 389

(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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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**Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GROSHALL, BENJAMIN, , ,**

Mailing Address 107 S ROSCOE BLVD

City  
PONTE VEDRA BEACHState  
FLZip Code  
32082-4127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
05	25	2016

Transaction ID : SA11A.292314

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GUARINO, KEVIN, , ,**

Mailing Address 201 BROMPTON ROAD

City  
GARDEN CITYState  
NYZip Code  
11530-1303FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M	D D	Y Y Y Y
05	08	2016

Transaction ID : SA11A.307682

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GUARINO, KEVIN, , ,**

Mailing Address 201 BROMPTON ROAD

City  
GARDEN CITYState  
NYZip Code  
11530-1303FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M	D D	Y Y Y Y
05	12	2016

Transaction ID : SA11A.307892

Amount of Each Receipt this Period

50.00

☐ 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

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(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GUM, GAYLE K, , ,**

Mailing Address **540 CULEBRA ROAD**

City  
**SAN ANTONIO**

State  
**TX**

Zip Code  
**78201-6419**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ACME SCREEN MFG.**

Occupation (for Individual)  
**OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**455.00**

Date of Receipt

**05 / 04 / 2016**

**Transaction ID : SA11A.307469**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GUYNES, JANELLE, , ,**

Mailing Address **10949 S FRUIT AVE**

City  
**FRESNO**

State  
**CA**

Zip Code  
**93706-9761**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286327**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HAIRE, WILLIAM, , ,**

Mailing Address **137 PUBLIC SQ**

City  
**BATESVILLE**

State  
**MS**

Zip Code  
**38606-2127**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA11A.288589**

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. HAMEL, DENNIS, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 448 N CEDAR BLUFF RD SUITE 135 City KNOXVILLE State TN Zip Code 37923-3612 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE 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 05 / 06 / 2016 <b>Transaction ID : SA11A.285288</b> Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>B. HANIGAN, THOM, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P.O. BOX 1001 City DOUGLAS State AZ Zip Code 85608-1001 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2016 <b>Transaction ID : SA11A.286157</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>C. HANSON, WALTER, LEE, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 100 SCHOOLEY CIR City DAPHNE State AL Zip Code 36526-7736 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 05 / 2016 <b>Transaction ID : SA11A.307491</b> Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			750.00
<b>TOTAL</b> 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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HARREL, DARLA, , ,**

Mailing Address HC 1  
BOX 1

City  
AVENAL

State  
CA

Zip Code  
93204-9701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 03 / 2016

Transaction ID : SA11A.283942

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAUPRICH, JOHN, , ,**

Mailing Address 101 BRIDGE LN

City

REEDVILLE

State

VA

Zip Code

22539-3603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 04 / 2016

Transaction ID : SA11A.284648

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEALD, JAMES, , ,**

Mailing Address P.O. BOX 74

City

RECLUSE

State

WY

Zip Code

82725-0074

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 24 / 2016

Transaction ID : SA11A.292137

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1200.00



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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. HEGNESS, PAUL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 711 W 17TH ST STE C6 City COSTA MESA State CA Zip Code 92627-4343 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE 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 05 / 27 / 2016 <b>Transaction ID : SA11A.290595</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>B. HERRING, MICHAEL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 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 (for Individual) SELF Occupation (for Individual) INSURANCE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 04 / 2016 <b>Transaction ID : SA11A.307444</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>C. HILLIARD, FINLEY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1006 BAKER RD City WESTLAKE State LA Zip Code 70669-7010 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2016 <b>Transaction ID : SA11A.287827</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			700.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
for each category of the  
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(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HILLIARD, FINLEY, , ,**

Mailing Address 1006 BAKER RD

City  
 WESTLAKE

State  
 LA

Zip Code  
 70669-7010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.308361**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HILYER, MARK, , ,**

Mailing Address P.O. BOX 1513

City  
 LIBBY

State  
 MT

Zip Code  
 59923-1513

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA11A.287236**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HILYER, MARK, , ,**

Mailing Address P.O. BOX 1513

City  
 LIBBY

State  
 MT

Zip Code  
 59923-1513

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.291728**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

325.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HOLLAND, BRIAN, , ,**

Mailing Address 10510 WOODLANDS TRL

City  
 ROWLETT

State  
 TX

Zip Code  
 75089-8317

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 DELL SERVICES

Occupation (for Individual)  
 IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA11A.307973**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HOLLIFIELD, TONY, , ,**

Mailing Address 600 MELVIN ST

City  
 GRANTS

State  
 NM

Zip Code  
 87020-3606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **10** / **2016**

**Transaction ID : SA11A.285775**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HOWELL, LORRAINE, , ,**

Mailing Address 3419 VIA LIDO

City  
 NEWPORT BEACH

State  
 CA

Zip Code  
 92663-3908

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA11A.291219**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

900.00

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

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

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(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HUESSEY, PETER, , ,**

Mailing Address **7526 CODDLE HARBOR LN**

City  
**POTOMAC**

State  
**MD**

Zip Code  
**20854-3249**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.308633**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HUTCHINSON, NANCY, , ,**

Mailing Address **HWY 11 BOX A**

City

**BROOKFIELD**

State

**MO**

Zip Code

**64628-**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**550.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA11A.288782**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. JAEGER, BEVERLY, , ,**

Mailing Address **2221 N COHOINA CIR**

City

**ST GEORGE**

State

**UT**

Zip Code

**84770-5318**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 05 / 2016**

**Transaction ID : SA11A.284762**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1050.00**

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. JOHNSTON, GARY, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2016 <b>Transaction ID : SA11A.286516</b>	
Mailing Address 1725 S ESCONDIDO BLVD STE A			Amount of Each Receipt this Period 200.00	
City ESCONDIDO	State CA	Zip Code 92025-6546	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 200.00	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. JOHNSON, PAT, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2016 <b>Transaction ID : SA11A.286423</b>	
Mailing Address 627 WILLIAMS AVE			Amount of Each Receipt this Period 500.00	
City NATCHITOCHES	State LA	Zip Code 71457-5169	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. JONES, MARGARET, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2016 <b>Transaction ID : SA11A.286283</b>	
Mailing Address 754 CAMINO LAKES CIR			Amount of Each Receipt this Period 100.00	
City BOCA RATON	State FL	Zip Code 33486-6953	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 275.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			800.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

Use separate schedule(s)  
for each category of the  
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(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. JONES, MARGARET, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 23 / 2016 <b>Transaction ID : SA11A.289838</b>	
Mailing Address 754 CAMINO LAKES CIR			Amount of Each Receipt this Period 100.00	
City BOCA RATON	State FL	Zip Code 33486-6953	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. JUMONVILLE JR., J. E., , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 14 / 2016 <b>Transaction ID : SA11A.307914</b>	
Mailing Address P.O. BOX 9			Amount of Each Receipt this Period 1000.00	
City VENTRESS	State LA	Zip Code 70783-0009	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. KAUFMAN, LORETTA, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 <b>Transaction ID : SA11A.290168</b>	
Mailing Address 2911 POWERHOUSE RD			Amount of Each Receipt this Period 75.00	
City YAKIMA	State WA	Zip Code 98902-1569	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 75.00	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 225.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1175.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 47 OF 389

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KELLY, GARY, , ,**

Mailing Address 3991 WARD BASIN RD

City  
 MILTON

State  
 FL

Zip Code  
 32583-8835

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA11A.290127**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KELLY, JOSEPH, , ,**

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 (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA11A.287487**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KILBY, WALT, , ,**

Mailing Address 2057 ELWIN WAY

City  
 MODESTO

State  
 CA

Zip Code  
 95350-0375

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA11A.307737**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1450.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KINNETT, DONALD, , ,**

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 (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 23 / 2016

Transaction ID : SA11A.289934

Amount of Each Receipt this Period

750.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KINZIE, ROBERT, , ,**

Mailing Address 8513 MEADOWLARK LANE

City

BETHESDA

State

MD

Zip Code

20817-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

KINZIE INC.

Occupation (for Individual)

SMALL BUSINESS 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  
05 / 06 / 2016

Transaction ID : SA11A.307548

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KIRALY, JS, , ,**

Mailing Address 636 MOSAIC CIR

City

OCEANSIDE

State

CA

Zip Code

92057-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BES

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  
05 / 31 / 2016

Transaction ID : SA11A.291810

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1550.00



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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KIRSCH, FREDERICK, , ,**

Mailing Address 4882 LANCASTER DR. NE  
 UNIT 73A

City  
 SALEM

State  
 OR

Zip Code  
 97305-5315

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA11A.287086**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KLIMEK, CHAD, , ,**

Mailing Address 2075 ROSE CREEK BLVD S

City  
 FARGO

State  
 ND

Zip Code  
 58104-6878

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA11A.286567**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KLIMEK, CHAD, , ,**

Mailing Address 2075 ROSE CREEK BLVD S

City  
 FARGO

State  
 ND

Zip Code  
 58104-6878

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA11A.308577**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

700.00

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  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KNICKERBOCKER, ALZADA, , ,**

Mailing Address 3103 WOODS CIRCLE

City  
**DAVIS**

State  
**CA**

Zip Code  
**95616-2685**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**RETAIL**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**210.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA11A.307941**

Amount of Each Receipt this Period

**10.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KOENIG, BETTE, , ,**

Mailing Address 2005 FARMGATE LN

City  
**LINCOLN**

State  
**CA**

Zip Code  
**95648-8600**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**NONE**

Occupation (for Individual)  
**NONE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA11A.307878**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KOGER, LINDA, , ,**

Mailing Address 7210 N WALNUT ST

City  
**MUNCIE**

State  
**IN**

Zip Code  
**47303-9796**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 04 / 2016**

**Transaction ID : SA11A.284420**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**310.00**

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KOGER, LINDA, , ,**

Mailing Address 7210 N WALNUT ST

City  
**MUNCIE**

State  
**IN**

Zip Code  
**47303-9796**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA11A.290316**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KORTH, DR. ROY, , ,**

Mailing Address 1909 CREEKS CROSSING CT

City  
**GROVE CITY**

State  
**OH**

Zip Code  
**43123-8339**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

BUCKEYE PHYSICAL MEDICINE AND REHAB

Occupation (for Individual)

SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA11A.307722**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KRAMER, MARK, , ,**

Mailing Address 1219 MAYO RD

City  
**EDGEWATER**

State  
**MD**

Zip Code  
**21037-4508**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286545**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**900.00**

<b>X</b>	11a		11b		11c		12		
	13		14		15		16		17

NAME OF COMMITTEE (In Full)  
GREAT AMERICA PAC

FEC Schedule A (Form 3X) Rev. 06/2016

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMBERT, STEPHEN, , ,**

Mailing Address 3138 SHAWNEE DR.

City  
 SUGAR LAND

State  
 TX

Zip Code  
 77479-1648

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA11A.308109**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAPIDUS, ROBERT, , ,**

Mailing Address 845 UNITED NATIONS PLAZA 47D

City  
 NEW YORK

State  
 NY

Zip Code  
 10017-3535

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 SELF EMPLOYED

Occupation (for Individual)  
 RADIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05** / **23** / **2016**

**Transaction ID : SA11A.289752**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAZARUS, THELMA, , ,**

Mailing Address 216 W. 4TH STREET

City  
 KEENE

State  
 TX

Zip Code  
 76059-1704

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05** / **05** / **2016**

**Transaction ID : SA11A.284777**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5600.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 54 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEDBETTER, CANDICE, , ,**

Mailing Address 4425 TYNE BLVD

City  
 NASHVILLE

State  
 TN

Zip Code  
 37215-4537

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 12 / 2016

Transaction ID : SA11A.286691

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LESLIE, SUELLEN, , ,**

Mailing Address 4061 CREEK RD

City  
 KITTY HAWK

State  
 NC

Zip Code  
 27949-3830

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 27 / 2016

Transaction ID : SA11A.290665

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LESTER, MORTON, , ,**

Mailing Address P.O. BOX 3747

City  
 MARTINSVILLE

State  
 VA

Zip Code  
 24115-3747

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 31 / 2016

Transaction ID : SA11A.291849

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 55 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LEWIS, SHIRLEY, , ,**

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 (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

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

Transaction ID : SA11A.284919

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LEWIS, SHIRLEY, , ,**

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 (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

Transaction ID : SA11A.288088

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LEWIS, SHIRLEY, , ,**

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 (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2016

Transaction ID : SA11A.288355

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

275.00

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

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

FOR LINE NUMBER: PAGE 56 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. LEWIS, SHIRLEY, , ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>05</span> <span>20</span> <span>2016</span> </div> <p><b>Transaction ID : SA11A.289439</b></p>	
Mailing Address 12634 GIANELLA RD			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>75.00</span> </div>	
City CHICO	State CA	Zip Code 95973-9742	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>710.00</span> </div>	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS			Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>710.00</span> </div>	

  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. LEWIS, SHIRLEY, , ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>05</span> <span>25</span> <span>2016</span> </div> <p><b>Transaction ID : SA11A.292318</b></p>	
Mailing Address 12634 GIANELLA RD			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>75.00</span> </div>	
City CHICO	State CA	Zip Code 95973-9742	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>710.00</span> </div>	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS			Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>710.00</span> </div>	

  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. LEWIS, SHIRLEY, , ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>05</span> <span>27</span> <span>2016</span> </div> <p><b>Transaction ID : SA11A.292607</b></p>	
Mailing Address 12634 GIANELLA RD			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>50.00</span> </div>	
City CHICO	State CA	Zip Code 95973-9742	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>710.00</span> </div>	
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS			Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>710.00</span> </div>	

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>200.00</span> </div>
<b>TOTAL</b> This Period (last page this line number only).....	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>



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

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

FOR LINE NUMBER: PAGE 57 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LIE-A-TJAM, REGGY, , ,**

Mailing Address 1415 MC DONALD WAY

City  
BAERSFIELD

State  
CA

Zip Code  
93309-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IVS COMPUTERS

Occupation (for Individual)  
CEO

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  
05 / 10 / 2016

Transaction ID : SA11A.307728

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LILLY, GARY, , ,**

Mailing Address 195 CULLEN DR.

City  
EARLEVILLE

State  
MD

Zip Code  
21919-1113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

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  
05 / 24 / 2016

Transaction ID : SA11A.290213

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LINDSTROM, D F, , ,**

Mailing Address 269 RAINBOW FALLS ROAD

City  
FRANKLIN

State  
NC

Zip Code  
28734-0027

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
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  
05 / 05 / 2016

Transaction ID : SA11A.307504

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1600.00

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

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

FOR LINE NUMBER: PAGE 58 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LINK, YVONNE, , ,**

Mailing Address 5031 CHERRY PL

City  
 SPRINGFIELD

State  
 MO

Zip Code  
 65809-1804

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 27 / 2016

Transaction ID : SA11A.290603

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LIVINGSTON, CHARLES, , ,**

Mailing Address 487 CARRINGTON CIR

City  
 THOMASVILLE

State  
 GA

Zip Code  
 31757-2953

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 27 / 2016

Transaction ID : SA11A.290596

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGES, VICKI, , ,**

Mailing Address 811 N 50TH AVE

City  
 YAKIMA

State  
 WA

Zip Code  
 98908-2408

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 27 / 2016

Transaction ID : SA11A.292616

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 59 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LONG, STEPHEN, , ,**

Mailing Address 310 GREENWAY LANE

City  
 RICHMOND

State  
 VA

Zip Code  
 23226-1632

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 COMMONWEALTH PAIN SPECIALISTS

Occupation (for Individual)  
 PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **06** / **2016**

**Transaction ID : SA11A.307610**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LOWDER, GARY, , ,**

Mailing Address 20130 NC 138 HWY

City  
 ALBEMARLE

State  
 NC

Zip Code  
 28001-8789

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA11A.308454**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LUCAS, ROBERT, , ,**

Mailing Address 5631 HIGHWAY 18 E

City  
 QUITMAN

State  
 MS

Zip Code  
 39355-9180

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA11A.291415**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

950.00

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

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

FOR LINE NUMBER: PAGE 60 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. LUEDERS, GARY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 402 BIG SPRING BLVD City PERRYVILLE State MO Zip Code 63775-2883 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2016 <b>Transaction ID : SA11A.287706</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>B. LUEDERS, GARY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 402 BIG SPRING BLVD City PERRYVILLE State MO Zip Code 63775-2883 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 <b>Transaction ID : SA11A.290347</b> Amount of Each Receipt this Period 35.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>C. MACLELLAN, LISA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1102 EAST BROW ROAD City LOOKOUT MOUNTAIN State TN Zip Code 37350-1016 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 <b>Transaction ID : SA11A.307543</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>SUBTOTAL</b> of Receipts This Page (optional).....		385.00
<b>TOTAL</b> 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 61 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MADDEN, JENNIFER, , ,**

Mailing Address 3665 ELEUTHERA COURT

City  
 LEXINGTON

State  
 KY

Zip Code  
 40509-9525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 ATTORNEY

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  
 05 / 16 / 2016

Transaction ID : SA11A.307929

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MAGUIRE, CRAIG, , ,**

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 (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

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  
 05 / 31 / 2016

Transaction ID : SA11A.291529

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MAJEWSKI, MARILYN, , ,**

Mailing Address 4845 JEREMIAH RD

City  
 COOKEVILLE

State  
 TN

Zip Code  
 38506-8746

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2016

Transaction ID : SA11A.285858

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 62 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. MAJEWSKI, MARILYN, , ,

Mailing Address 4845 JEREMIAH RD

City  
 COOKEVILLE

State  
 TN

Zip Code  
 38506-8746

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : SA11A.289273

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARCUS, JANE, , ,

Mailing Address 8065 INNISBROOK COURT

City  
 COLUMBUS

State  
 GA

Zip Code  
 31909-2088

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2016

Transaction ID : SA11A.308075

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MARFIELD, SAM, , ,

Mailing Address 11637 TALON DR.

City  
 NAPLES

State  
 FL

Zip Code  
 34120-4328

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

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  
 05 / 06 / 2016

Transaction ID : SA11A.307523

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 63 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MARIO, GREGORY, , ,**

Mailing Address 1500 OCEAN DR.  
PH 5

City  
MIAMI BEACH

State  
FL

Zip Code  
33139-3147

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2016

Transaction ID : SA11A.288444

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MARTHIOL, SHARON, , ,**

Mailing Address 8899 E PRENTICE AVE  
APT 2101

City  
ENGLEWOOD

State  
CO

Zip Code  
80111-3352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2016

Transaction ID : SA11A.288805

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MARTIN, SUSAN, , ,**

Mailing Address 706 GOLF VIEW DR. NW

City  
CLEVELAND

State  
TN

Zip Code  
37312-6424

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SOUTH EAST ASSOCIATES

Occupation (for Individual)

SALES

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  
05 / 25 / 2016

Transaction ID : SA11A.308184

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2400.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 64 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MARTIN, THOMAS, , ,**

Mailing Address **4814-99TH ST.**

City  
**LUBBOCK**

State  
**TX**

Zip Code  
**79424-6358**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**TEXAS TECH UNIVERSITY**

Occupation (for Individual)  
**PART-TIME INSTRUCTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA11A.308094**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MATES, LARRY, , ,**

Mailing Address **12 OLD BARN DR.**

City

**WEST CHESTER**

State

**PA**

Zip Code

**19382-8338**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**HEALTHCARE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**230.00**

Date of Receipt

**05 / 04 / 2016**

**Transaction ID : SA11A.307470**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MCCORD, PAUL, , ,**

Mailing Address **2222 CHAMBLISS AVE**

City

**CLEVELAND**

State

**TN**

Zip Code

**37311-3895**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**SELF**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 08 / 2016**

**Transaction ID : SA11A.307678**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**800.00**



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCCOY, MARLIN, , ,

Mailing Address 151 MCCOY RD

City  
 RINGGOLD

State  
 LA

Zip Code  
 71068-3427

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 18 / 2016

Transaction ID : SA11A.288649

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCOY, MARLIN, , ,

Mailing Address 151 MCCOY RD

City  
 RINGGOLD

State  
 LA

Zip Code  
 71068-3427

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 27 / 2016

Transaction ID : SA11A.292836

Amount of Each Receipt this Period

35.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MELTNER, MARTIN, , ,

Mailing Address 10953 WAR ADMIRAL DR.

City  
 UNION

State  
 KY

Zip Code  
 41091-7739

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2016

Transaction ID : SA11A.286570

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

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

435.00

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 66 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MELTNER, MARTIN, , ,**

Mailing Address 10953 WAR ADMIRAL DR.

City  
 UNION

State  
 KY

Zip Code  
 41091-7739

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **27** / **2016**

**Transaction ID : SA11A.292712**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. METZGER, JOHN, , ,**

Mailing Address 14850 HIGHWAY FF

City  
 VICHY

State  
 MO

Zip Code  
 65580-7104

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA11A.287483**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MILLER, MATTHEW, , ,**

Mailing Address 1260 WOODBROOK CT

City  
 RESTON

State  
 VA

Zip Code  
 20194-1344

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **05** / **2016**

**Transaction ID : SA11A.285033**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

700.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MILLER, ROLAND, , ,**

Mailing Address **80 W PRIVATE ROAD 1250 N**

City  
**BRAZIL**

State  
**IN**

Zip Code  
**47834-6942**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 24 / 2016**

Transaction ID : **SA11A.290303**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MIRANDA, WILFRED, , ,**

Mailing Address **51 N BOUNTY LN**

City

**KEY LARGO**

State

**FL**

Zip Code

**33037-2304**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**275.00**

Date of Receipt

**05 / 05 / 2016**

Transaction ID : **SA11A.284797**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MIRANDA, WILFRED, , ,**

Mailing Address **51 N BOUNTY LN**

City

**KEY LARGO**

State

**FL**

Zip Code

**33037-2304**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**275.00**

Date of Receipt

**05 / 11 / 2016**

Transaction ID : **SA11A.286522**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**400.00**

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 68 OF 389

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MITCHEM, DENNIS, , ,**

Mailing Address 1616 W GLENDAL AV #588

City  
 PHOENIX

State  
 AZ

Zip Code  
 85021-8948

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA11A.308185**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MITCHELL, GAYLE, , ,**

Mailing Address 3 BUCKSKIN LN

City

ROLLING HILLS ESTA

State  
 CA

Zip Code  
 90274-4253

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286321**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MONTES, ROBERT, , ,**

Mailing Address 4306 STILLWELL AVE

City

LOS ANGELES

State  
 CA

Zip Code  
 90032-1234

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA11A.285270**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

325.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MONTES, ROBERT, , ,**

Mailing Address **4306 STILLWELL AVE**

City  
**LOS ANGELES**

State  
**CA**

Zip Code  
**90032-1234**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**425.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286360**

Amount of Each Receipt this Period

**75.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MONTES, ROBERT, , ,**

Mailing Address **4306 STILLWELL AVE**

City  
**LOS ANGELES**

State  
**CA**

Zip Code  
**90032-1234**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**425.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA11A.292265**

Amount of Each Receipt this Period

**75.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MOSS, CAROL, , ,**

Mailing Address **942 FAIRWAY DR.**

City  
**BAKERSFIELD**

State  
**CA**

Zip Code  
**93309-2417**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 05 / 2016**

**Transaction ID : SA11A.285077**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**650.00**

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

 Use separate schedule(s)  
 for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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 NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOSS, EDWARD, , ,**

Mailing Address 415 BIG RIVER CIR

 City  
 BONNE TERRE

 State  
 MO

 Zip Code  
 63628-8671

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 FRED WEBER INC

 Occupation (for Individual)  
 PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2016

Transaction ID : SA11A.286430

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOUROUTAS, MIKE, , ,**

Mailing Address 2438 47 STREET

 City  
 ASTORIA

 State  
 NY

 Zip Code  
 11103-1010

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 FIRSTLINE CONTRACTING INC

 Occupation (for Individual)  
 BUSINESS 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  
 05 / 19 / 2016

Transaction ID : SA11A.308032

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NELSON, ALICE, , ,**

Mailing Address 17 TRAILER PARK RD

 City  
 WOODSVILLE

 State  
 NH

 Zip Code  
 03785-1334

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

 Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

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  
 05 / 23 / 2016

Transaction ID : SA11A.289802

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)  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NELSON, ALICE, , ,**

Mailing Address 17 TRAILER PARK RD

City  
 WOODSVILLE

State  
 NH

Zip Code  
 03785-1334

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.308593**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NERSTEN, KENNETH, , ,**

Mailing Address 552 HAMILTON STREET UNIT E-1

City  
 COSTA MESA

State  
 CA

Zip Code  
 92627-5502

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

VITAMINS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 08 / 2016**

**Transaction ID : SA11A.307676**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NICHOLAS, PHYLLIS, W., ,**

Mailing Address 40 HOWARD ROAD

City  
 GREENWICH

State  
 CT

Zip Code  
 06831-3104

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.308340**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

950.00

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

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

FOR LINE NUMBER: PAGE 72 OF 389

(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. NYBERG, PJ, , ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M = M / D = D / Y = Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>05 / 20 / 2016</span> </div> <b>Transaction ID : SA11A.289396</b>	
Mailing Address <b>P.O. BOX 3</b>			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>500.00</span> </div>	
City <b>EAST DENNIS</b>	State <b>MA</b>	Zip Code <b>02641-0003</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>500.00</span> </div>	
Name of Employer (for Individual) <b>INFORMATION REQUESTED PER BEST EFFORTS</b>			Occupation (for Individual) <b>INFORMATION REQUESTED PER BE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>500.00</span> </div>	

  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ODIORNE, WOODWARD, , ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M = M / D = D / Y = Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>05 / 05 / 2016</span> </div> <b>Transaction ID : SA11A.307501</b>	
Mailing Address <b>372 LUCKY HILL ROAD</b>			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>250.00</span> </div>	
City <b>WEST CHESTER</b>	State <b>PA</b>	Zip Code <b>19382-2049</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>250.00</span> </div>	
Name of Employer (for Individual) <b>SELF</b>			Occupation (for Individual) <b>FINANCIAL CONSULTANT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>250.00</span> </div>	

  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. OLEARY, GEORGE, , ,</b>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M = M / D = D / Y = Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>05 / 11 / 2016</span> </div> <b>Transaction ID : SA11A.286340</b>	
Mailing Address <b>6141 E CALLE ALTA VIS</b>			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>500.00</span> </div>	
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85715-3102</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>575.00</span> </div>	
Name of Employer (for Individual) <b>INFORMATION REQUESTED PER BEST EFFORTS</b>			Occupation (for Individual) <b>INFORMATION REQUESTED PER BE</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>575.00</span> </div>	

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>1250.00</span> </div>
<b>TOTAL</b> This Period (last page this line number only).....	<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. ORTH, ROBERT, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1600 NW 12THST City BLUE SPRINGS State MO Zip Code 64015-1776 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2016 <b>Transaction ID : SA11A.286562</b> Amount of Each Receipt this Period 35.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>B. OWENS, NEIL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 251 COUNTY ROAD 80 City MUSCADINE State AL Zip Code 36269-3727 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2016 <b>Transaction ID : SA11A.286518</b> Amount of Each Receipt this Period 150.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>C. PADAYAO, FIDEL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 13735 CABRILLO CT City FONTANA State CA Zip Code 92336-3406 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016 <b>Transaction ID : SA11A.289005</b> Amount of Each Receipt this Period 75.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			260.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PADAYAO, FIDEL, , ,**

Mailing Address 13735 CABRILLO CT

City  
 FONTANA

State  
 CA

Zip Code  
 92336-3406

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.291727**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PANCETTI, JOHN A, , ,**

Mailing Address 33 LUSITANO ROAD

City

MANALAPAN

State

NJ

Zip Code

07726-9572

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA11A.308026**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PAUNESCU, CALIN, , ,**

Mailing Address 1000 N MILWAUKEE SUITE 303

City

CHICAGO

State

IL

Zip Code

60642-4000

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

PRESIDENT OF TATY CONSTRUCTION

Occupation (for Individual)

REAL ESTATE DEVELOPMENT AND C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA11A.307703**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PECHULS, ROGER, , ,**

Mailing Address 1204 S BAY FRONT

City  
NEWPORT BEACHState  
CAZip Code  
92662-1233FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 16 / 2016

Transaction ID : SA11A.287482

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PEHULS, ROGER, , ,**

Mailing Address 1204 SOTH BAY FRONT

City  
NEWPORT BEACHState  
CAZip Code  
92662-FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 27 / 2016

Transaction ID : SA11A.290602

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PENA, JOANN, , ,**

Mailing Address 2689 E SEAN AVE

City  
FRESNOState  
CAZip Code  
93720-0305FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 18 / 2016

Transaction ID : SA11A.288586

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

1700.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PERRY, SAMANTHA, , ,

Mailing Address 2102 TIPPERARY DR.

City  
 PEARLAND

State  
 TX

Zip Code  
 77581-5150

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 17 / 2016

Transaction ID : SA11A.288263

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETERSON, CHRISTINE, , ,

Mailing Address 157 GREY FOX TRL

City  
 CLAYTON

State  
 GA

Zip Code  
 30525-3617

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 27 / 2016

Transaction ID : SA11A.290923

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETRONE, LOUIS, , ,

Mailing Address 11926 ESTY WAY

City  
 CARMEL

State  
 IN

Zip Code  
 46033-8128

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

1945

Occupation (for Individual)

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11A.307453

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

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

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

300.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PHILLIPS, DAN, , ,**

Mailing Address 1020 W MAIN ST

City  
ARLINGTON

State  
TX

Zip Code  
76013-1817

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286269**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PHILLIPS, DAN, , ,**

Mailing Address 1020 W MAIN ST

City  
ARLINGTON

State  
TX

Zip Code  
76013-1817

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286536**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. POPA, ANCA, , ,**

Mailing Address 71 NORWOOD AVE

City  
MONTCLAIR

State  
NJ

Zip Code  
07043-1950

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286232**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1150.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. POWELL, THOMAS, , ,**

Mailing Address P.O. BOX 263

City  
 REDWOOD

State  
 MS

Zip Code  
 39156-0263

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : SA11A.289265

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PRAEGITZER, DENNIS, , ,**

Mailing Address 10801 STARWOOD DR.

City

PALO CEDRO

State

CA

Zip Code

96073-9562

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 25 / 2016

Transaction ID : SA11A.292174

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PRATT, JOHN, T., ,**

Mailing Address 1479 SW SHORELINE DR.

City

PALM CITY

State

FL

Zip Code

34990-4535

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

27500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2016

Transaction ID : SA11A.307796

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

1200.00

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

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

FOR LINE NUMBER: PAGE 79 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PRATT, LYN, , ,**

Mailing Address 1445 GUMMOW DR.

City  
FALLON

State  
NV

Zip Code  
89406-6450

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA11A.291435**

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PRENTICE, ROBERT, , ,**

Mailing Address 13343 EDINDERG DR.

City  
PEOTONE

State  
IL

Zip Code  
60468-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA11A.288317**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PURDY, MAUREEN, , ,**

Mailing Address 45 GREAT OAKS LN

City  
OXFORD

State  
ME

Zip Code  
04270-6628

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **04** / **2016**

**Transaction ID : SA11A.284462**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

220.00

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

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

FOR LINE NUMBER: PAGE 80 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PURDY, MAUREEN, , ,**

Mailing Address **45 GREAT OAKS LN**

City  
**OXFORD**

State  
**ME**

Zip Code  
**04270-6628**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 05 / 2016**

**Transaction ID : SA11A.284826**

Amount of Each Receipt this Period

**75.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. RADCLIFFE, JAMES, , ,**

Mailing Address **100 PASSAIC AVENUE  
 SUITE 220**

City  
**FAIRFIELD**

State  
**NJ**

Zip Code  
**07004-3508**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**DENTISTRY TODAY**

Occupation (for Individual)  
**SALES**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA11A.308190**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. RALSTON, NORMAN, , ,**

Mailing Address **18690 SW ALDERWOOD DRL**

City  
**BEAVERTON**

State  
**OR**

Zip Code  
**97003-2956**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**AERO AIR LLC**

Occupation (for Individual)  
**PILOT/SALESMAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.308329**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1325.00**



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

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

FOR LINE NUMBER: PAGE 81 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. REEDMD, MELVIN, , ,**

Mailing Address 1248 FRICK ROAD

City  
 LEONARD

State  
 MI

Zip Code  
 48367-3174

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA11A.307579**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. REEDMD, MELVIN, , ,**

Mailing Address 1248 FRICK ROAD

City  
 LEONARD

State  
 MI

Zip Code  
 48367-3174

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA11A.307740**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. REGO, SANDRA, , ,**

Mailing Address 711 SE SAINT LUCIE BLVD

City  
 STUART

State  
 FL

Zip Code  
 34996-1324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.291518**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. RICHARD, FAYE, , ,**

Mailing Address 4700 PINON CT

City  
NORMAN

State  
OK

Zip Code  
73072-3443

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 19 / 2016

Transaction ID : SA11A.289241

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. RICHMAN, LLOYD, , ,**

Mailing Address 22914 JOHN AVERY LN

City

SUMMERLAND KEY

State

FL

Zip Code

33042-4316

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2016

Transaction ID : SA11A.284892

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. RICHMAN, LLOYD, , ,**

Mailing Address 22914 JOHN AVERY LN

City

SUMMERLAND KEY

State

FL

Zip Code

33042-4316

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 11 / 2016

Transaction ID : SA11A.286571

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

500.00

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

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

FOR LINE NUMBER: PAGE 83 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ROGERS, WILLIAM, , ,**

Mailing Address **8315 KINDRED SPIRIT LANE**

City  
**SAINT AUGUSTINE**

State  
**FL**

Zip Code  
**32092-2203**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ROGERS HOLSTER COMPANY**

Occupation (for Individual)  
**MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA11A.308212**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ROSSBERG, KEITH, , ,**

Mailing Address **1086 W SOUTH JORDAN PKWY**  
**STE 101**

City  
**SOUTH JORDAN**

State  
**UT**

Zip Code  
**84095-4507**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA11A.285756**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. RUST, ROBERT, , ,**

Mailing Address **1430 S DIXIE HWY**  
**STE 315**

City  
**CORAL GABLES**

State  
**FL**

Zip Code  
**33146-3174**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BES**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA11A.288351**

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**5500.00**

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

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

FOR LINE NUMBER: PAGE 84 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. RYAN, JOHN, , ,**

Mailing Address **818 RIVER RD**

City  
**MARSHALL**

State  
**MI**

Zip Code  
**49068-1811**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)

**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**220.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA11A.287529**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SANCHEZ, ROBERT, , ,**

Mailing Address **4811 PALISADE DRIVE**

City  
**AUSTIN**

State  
**TX**

Zip Code  
**78731-4538**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**HEXADYNE CORPORATION**

Occupation (for Individual)  
**CEO/PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5100.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA11A.288835**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SANCHEZ, ROBERT, , ,**

Mailing Address **4811 PALISADE DRIVE**

City  
**AUSTIN**

State  
**TX**

Zip Code  
**78731-4538**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**HEXADYNE CORPORATION**

Occupation (for Individual)  
**CEO/PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**5100.00**

Date of Receipt

**05 / 22 / 2016**

**Transaction ID : SA11A.308106**

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**5250.00**

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

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

FOR LINE NUMBER: PAGE 85 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANTOS, EDWINA, , ,**

Mailing Address P.O. BOX 447

City  
 PRATHER

State  
 CA

Zip Code  
 93651-0447

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2016

Transaction ID : SA11A.288778

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SANTOS, EDWINA, , ,**

Mailing Address P.O. BOX 447

City  
 PRATHER

State  
 CA

Zip Code  
 93651-0447

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

Transaction ID : SA11A.292205

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SARVER, GREG, , ,**

Mailing Address 115 BROOK DR.

City  
 CROWLEY

State  
 LA

Zip Code  
 70526-2026

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
 05 / 12 / 2016

Transaction ID : SA11A.286870

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

375.00

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

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

FOR LINE NUMBER: PAGE 86 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SAUR, PHILIP, , ,**

Mailing Address P.O. BOX 111

City  
 SPARTA

State  
 MI

Zip Code  
 49345-0111

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2016

Transaction ID : SA11A.285295

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SAUR, PHILIP, , ,**

Mailing Address P.O. BOX 111

City  
 SPARTA

State  
 MI

Zip Code  
 49345-0111

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2016

Transaction ID : SA11A.285339

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAUR, PHILIP, , ,**

Mailing Address P.O. BOX 111

City  
 SPARTA

State  
 MI

Zip Code  
 49345-0111

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2016

Transaction ID : SA11A.285409

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

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

250.00

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 87 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SAUR, PHILIP, , ,**

Mailing Address P.O. BOX 111

City  
SPARTAState  
MIZip Code  
49345-0111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		10		2016

Transaction ID : SA11A.285714

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SAUR, PHILIP, , ,**

Mailing Address P.O. BOX 111

City  
SPARTAState  
MIZip Code  
49345-0111FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		10		2016

Transaction ID : SA11A.285794

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SCHWERER, RITA, , ,**

Mailing Address 5616 N HAMILTON RD

City  
PEORIAState  
ILZip Code  
61614-3832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		17		2016

Transaction ID : SA11A.287856

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

400.00

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

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

FOR LINE NUMBER: PAGE 88 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHORE, MICHAEL, , ,**

Mailing Address 6144 SW 27TH ST

City  
 MIAMI

State  
 FL

Zip Code  
 33155-3141

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286418**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIDWELL, MIKE, , ,**

Mailing Address 62 SEA VENTURE ALY

City

ALYS BEACH

State

FL

Zip Code

32413-8243

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA11A.289756**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SKOOG, ELMER, , ,**

Mailing Address 1515 S 22ND AVE

City

PHOENIX

State

AZ

Zip Code

85009-6521

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA11A.289261**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00



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

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

FOR LINE NUMBER: PAGE 89 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMALL, JAMES, , ,**

Mailing Address 5807 MADAKET ROAD

City  
BETHESDA

State  
MD

Zip Code  
20816-3201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SOUTHERN ENGINEERING CORP.

Occupation (for Individual)  
REAL ESTATE INVESTOR

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  
05 / 04 / 2016

Transaction ID : SA11A.307450

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, JAMES, , ,**

Mailing Address 1726 NE OCEAN BLVD

City  
STUART

State  
FL

Zip Code  
34996-2927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMWARE PALLET SERVICES

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 06 / 2016

Transaction ID : SA11A.307536

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, LAURENCE, , ,**

Mailing Address 100 BREEZY HILL RD.

City  
COLLINSVILLE

State  
CT

Zip Code  
06019-3607

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
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  
05 / 31 / 2016

Transaction ID : SA11A.291201

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5500.00

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

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

FOR LINE NUMBER: PAGE 90 OF 389

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SORENSON, LINDA, , ,**

Mailing Address 1619 SOUTH 58TH ST

City  
WEST ALLIS

State  
WI

Zip Code  
53214-5116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
UNEMPLOYED

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA11A.308137**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SOUSA, MANUEL, , ,**

Mailing Address 254 QUILL AVE

City  
THE VILLAGES

State  
FL

Zip Code  
32162-5034

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NAVY

Occupation (for Individual)  
AVIATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05** / **04** / **2016**

**Transaction ID : SA11A.307463**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SPICZAK, ANNIE, , ,**

Mailing Address 9214 W MONTANA DE ORO DR.

City  
PEORIA

State  
AZ

Zip Code  
85383-2204

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA11A.286412**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SPICZAK, ANNIE, , ,**

Mailing Address 9214 W MONTANA DE ORO DR.

City  
PEORIAState  
AZZip Code  
85383-2204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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
0	5		1	8		2	0	1	6		

Transaction ID : SA11A.288786

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SQUIRES, RICHARD, , ,**

Mailing Address P.O. BOX 1047

City

DONALSONVILLE

State  
GAZip Code  
39845-1047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	1		2	0	1	6		

Transaction ID : SA11A.286161

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. STEFANICH, PATRICIA, , ,**

Mailing Address 27 SHEFFIELD CT

City

VICTOR

State  
NYZip Code  
14564-8980FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

HOMEMAKER/RN

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
0	5		0	6		2	0	1	6		

Transaction ID : SA11A.307512

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

# **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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TATUM, JOHN, , ,**

Mailing Address 3709 MAPLEWOOD AVE

City  
DALLAS

State  
TX

Zip Code  
75205-2826

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2016

Transaction ID : SA11A.284036

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TATUM, JOHN, , ,**

Mailing Address 3709 MAPLEWOOD AVE

City  
DALLAS

State  
TX

Zip Code  
75205-2826

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

Transaction ID : SA11A.288291

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TODD, JEFFREY, , ,**

Mailing Address 32471 COUNTY ROAD 323

City  
CLARKTON

State  
MO

Zip Code  
63837-8195

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

Transaction ID : SA11A.288310

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

325.00

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

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

FOR LINE NUMBER: PAGE 93 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TOLAN, RALPH, , ,**

Mailing Address 1702 HAMILTON AVE

City  
 ROCKFORD

State  
 IL

Zip Code  
 61109-2210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05 / 03 / 2016**

**Transaction ID : SA11A.283885**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TOLLEY, LLOYD, , ,**

Mailing Address 49 12TH ST

City

BUCHANAN

State

VA

Zip Code

24066-5483

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA11A.288636**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TOLLEY, LLOYD, , ,**

Mailing Address 49 12TH ST

City

BUCHANAN

State

VA

Zip Code

24066-5483

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA11A.293092**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TOMPKINS, JON, , ,**

Mailing Address 61708 BROKEN TOP DRIVE

City  
BENDState  
ORZip Code  
97702-1088FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	D D	Y Y Y Y
05	11	2016

Transaction ID : SA11A.307786

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TORNBERG, DON, , ,**

Mailing Address 6 ACORN CT

City  
NOVATOState  
CAZip Code  
94949-6603FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTSOccupation (for Individual)  
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
05	27	2016

Transaction ID : SA11A.290423

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TOURINO, JOHNNY, , ,**

Mailing Address 23807 ALISO CREEK ROAD SUITE 220

City  
LAGUNA NIGUELState  
CAZip Code  
92677-3929FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPECTRAOccupation (for Individual)  
VP/GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
05	11	2016

Transaction ID : SA11A.307808

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

1450.00

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 95 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TOURINO, JOHNNY, , ,**

Mailing Address 23807 ALISO CREEK ROAD SUITE 220

City  
LAGUNA NIGUEL

State  
CA

Zip Code  
92677-3929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPECTRA

Occupation (for Individual)  
VP/GM

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  
05 / 25 / 2016

Transaction ID : SA11A.308227

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TRAHAN, SCOTT, , ,**

Mailing Address 7039 LAKE EDGE DR.

City  
DALLAS

State  
TX

Zip Code  
75230-2368

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)  
INFORMATION REQUESTED PER BE

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  
05 / 10 / 2016

Transaction ID : SA11A.285745

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TRAN, NIKI, , ,**

Mailing Address 2108 E. HELENA DR.

City  
PHOENIX

State  
AZ

Zip Code  
85022-2239

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

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  
05 / 04 / 2016

Transaction ID : SA11A.307430

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TRINKLE, JAMIE, , ,**

Mailing Address 993 ANGLERS PT

City  
BLUFF DALE

State  
TX

Zip Code  
76433-4273

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 02 / 2016

Transaction ID : SA11A.283691

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VALLE, LAURENCE, , ,**

Mailing Address 10024 SW 130TH TER

City  
MIAMI

State  
FL

Zip Code  
33176-5613

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 12 / 2016

Transaction ID : SA11A.286879

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. VAUGHAN, SCOTT, , ,**

Mailing Address 428 E HICKORY ST

City  
PONCHATOULA

State  
LA

Zip Code  
70454-2540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 16 / 2016

Transaction ID : SA11A.287126

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00



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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. VERFAILLIE, HENDRIK, , ,**

Mailing Address 1420 NIGHTHAWK PT

City  
**NAPLES**

State  
**FL**

Zip Code  
**34105-2789**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**05 / 07 / 2016**

**Transaction ID : SA11A.307642**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. VINCENT, HUGH, , ,**

Mailing Address 440 WOODRIDGE DR.

City  
**MURFREESBORO**

State  
**NC**

Zip Code  
**27855-2124**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286358**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. VONDERHAAR, KATHY, , ,**

Mailing Address 5202 FLOYD UNIT B

City  
**HOUSTON**

State  
**TX**

Zip Code  
**77007-5211**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 05 / 2016**

**Transaction ID : SA11A.307499**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**450.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

**A. WAGNER, ROBERT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N329 MYRA LN

City WHITEWATER	State WI	Zip Code 53190-3053
--------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA11A.286506**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**B. WALKER, JOIE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 209 S 11TH ST

City WILLIAMSBURG	State KY	Zip Code 40769-1406
----------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA11A.287807**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**C. WALLRATH, RICHARD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 469

City CENTERVILLE	State TX	Zip Code 75833-0469
---------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

**05 / 04 / 2016**

**Transaction ID : SA11A.284487**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1100.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WALPOLE, HERB, , ,**

Mailing Address 18927 ALDINE WESTFIELD RD

City  
**HOUSTON**

State  
**TX**

Zip Code  
**77073-3817**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA11A.293140**

Amount of Each Receipt this Period

**200.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WARD, WILLIAM, , ,**

Mailing Address 5623 PLUMTREE DR.

City  
**DALLAS**

State  
**TX**

Zip Code  
**75252-4928**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA11A.290599**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. WASSERMAN, DAVID, , ,**

Mailing Address 2338 CASERTA CT

City  
**HENDERSON**

State  
**NV**

Zip Code  
**89074-5337**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA11A.291495**

Amount of Each Receipt this Period

**400.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1100.00**

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WEBSTER, JIM, , ,**

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 (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA11A.293093**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WERN, JOHN, , ,**

Mailing Address 88 CR 144

City  
**CORINTH**

State  
**MS**

Zip Code  
**38834-1309**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

WERNER AIR

Occupation (for Individual)

SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA11A.307506**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. WHITE, JANET, , ,**

Mailing Address 1255 RAILROAD ST

City  
**CORONA**

State  
**CA**

Zip Code  
**92882-1838**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA11A.292172**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITE, RICHARD, , ,**

Mailing Address 3038 PARK RD

City  
CHARLOTTE

State  
NC

Zip Code  
28209-1444

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 27 / 2016

Transaction ID : SA11A.290594

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, DAVID, , ,**

Mailing Address 4142 NEWMANS NECK RD

City  
HEATHSVILLE

State  
VA

Zip Code  
22473-2267

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 18 / 2016

Transaction ID : SA11A.288770

Amount of Each Receipt this Period

150.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, GEORGE, , ,**

Mailing Address P.O. BOX 14

City  
MEDANALES

State  
NM

Zip Code  
87548-0014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

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  
05 / 20 / 2016

Transaction ID : SA11A.289541

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

650.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WILLIAMS, THOMAS, , ,**

Mailing Address 18 BROOKHAVEN LN

City  
LITTLETON

State  
CO

Zip Code  
80123-6685

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA11A.288836**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WILSON, ANN, , ,**

Mailing Address 730 YORKSHIRE LN

City  
SAINT CLAIR

State  
MO

Zip Code  
63077-3402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA11A.286251**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

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)..... ►

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

350.00

106770.00

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

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ADAMS, GARY, , ,**

Mailing Address 3420-H W MACARTHUR BLVD

City  
 SANTA ANA

State  
 CA

Zip Code  
 92704-6853

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 ADAMS PROPERTIES

Occupation (for Individual)  
 PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.302328**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ADAMS, GARY, , ,**

Mailing Address 3420-H W MACARTHUR BLVD

City  
 SANTA ANA

State  
 CA

Zip Code  
 92704-6853

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 ADAMS PROPERTIES

Occupation (for Individual)  
 PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305491**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ADAMS, GARY, , ,**

Mailing Address 3420-H W MACARTHUR BLVD

City  
 SANTA ANA

State  
 CA

Zip Code  
 92704-6853

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 ADAMS PROPERTIES

Occupation (for Individual)  
 PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**05** / **27** / **2016**

**Transaction ID : SA17.305867**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00

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

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ADAMS, GARY, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2016 <b>Transaction ID : SA17.306969</b>	
Mailing Address 3420-H W MACARTHUR BLVD			Amount of Each Receipt this Period 100.00	
City SANTA ANA	State CA	Zip Code 92704-6853	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) ADAMS PROPERTIES		Occupation (for Individual) PROPERTY MANAGEMENT	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. AHLBUM, JON, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2016 <b>Transaction ID : SA17.303834</b>	
Mailing Address 660 NW 49TH AVE			Amount of Each Receipt this Period 250.00	
City COCONUT CREEK	State FL	Zip Code 33063-4629	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SELF		Occupation (for Individual) INSURANCE SALES	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. AHLBUM, JON, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.305430</b>	
Mailing Address 660 NW 49TH AVE			Amount of Each Receipt this Period 100.00	
City COCONUT CREEK	State FL	Zip Code 33063-4629	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SELF		Occupation (for Individual) INSURANCE SALES	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 350.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			450.00	
<b>TOTAL</b> 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 105 OF 389  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ALBERS, PAUL, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 13 / 2016</div> </div>	
Mailing Address 03985, STATE ROUTE 119			<b>Transaction ID : SA17.296160</b>	
City MINSTER	State OH	Zip Code 45865-8702	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) SELF		Occupation (for Individual) INSURANCE AGENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ALDRIAN, A. PETER, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 21 / 2016</div> </div>	
Mailing Address P.O. BOX 613			<b>Transaction ID : SA17.303840</b>	
City PINELAND	State FL	Zip Code 33945-0613	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) MEETINGS & INCENTIVE PROFESSIONALS		Occupation (for Individual) SALE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. ALGER, AURELIE, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 06 / 2016</div> </div>	
Mailing Address 138 AMBERVILLE ROAD			<b>Transaction ID : SA17.293664</b>	
City NORTH ANDOVER	State MA	Zip Code 01845-3378	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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

FOR LINE NUMBER: PAGE 106 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ALLEN, HAROLD, , ,**

Mailing Address 1093 A1A BEACH BLVD

City  
**SAINT AUGUSTINE**

State  
**FL**

Zip Code  
**32080-6733**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**ORTHOPEDIC SURGEON**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 07 / 2016**

**Transaction ID : SA17.293787**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ALLEN, HAROLD, , ,**

Mailing Address 1093 A1A BEACH BLVD

City  
**SAINT AUGUSTINE**

State  
**FL**

Zip Code  
**32080-6733**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**ORTHOPEDIC SURGEON**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.303617**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ALVEAR, DOMINGO, , ,**

Mailing Address 60 PLEASANT GROVE ROAD

City  
**MECHANICSBURG**

State  
**PA**

Zip Code  
**17050-1526**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 26 / 2016**

**Transaction ID : SA17.304632**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**2000.00**

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

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

FOR LINE NUMBER: PAGE 107 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ANDRADE, GAIL, , ,**

Mailing Address **903 PLAYERS CIRCLE**

City  
**SUMMERVILLE**

State  
**SC**

Zip Code  
**29485-6224**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ANDRADE FAMILY**

Occupation (for Individual)  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**2500.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.296193**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ANDREWS, CHERYL, , ,**

Mailing Address **11221 OAKLEAF LANE**

City  
**OKLAHOMA CITY**

State  
**OK**

Zip Code  
**73131-3260**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 09 / 2016**

**Transaction ID : SA17.299301**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ANGELO, RICHARD, , ,**

Mailing Address **11774 MONTE LEON WAY**

City  
**NORTHRIDGE**

State  
**CA**

Zip Code  
**91326-1514**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**STAY GREEN INC.**

Occupation (for Individual)  
**LANDSCAPE CONTRACTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.307053**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**3000.00**

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

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

FOR LINE NUMBER: PAGE 108 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ARCHIBALD, THOMAS, , ,**

Mailing Address 2505 SIERRA VISTA RD.

City  
**ARTESIA**

State  
**NM**

Zip Code  
**88210-9429**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 09 / 2016**

**Transaction ID : SA17.299262**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ARCHIBALD, THOMAS, , ,**

Mailing Address 2505 SIERRA VISTA RD.

City  
**ARTESIA**

State  
**NM**

Zip Code  
**88210-9429**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.303539**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ARCHIBALD, THOMAS, , ,**

Mailing Address 2505 SIERRA VISTA RD.

City  
**ARTESIA**

State  
**NM**

Zip Code  
**88210-9429**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.307019**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**250.00**

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

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

FOR LINE NUMBER: PAGE 109 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARMSTRONG, ROBERTA, , ,**

Mailing Address 2276 MILL ROAD

City  
BINGHAMTON

State  
NY

Zip Code  
13903-6144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ARMSTRONG TELECOM

Occupation (for Individual)  
TELECOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05** / **04** / **2016**

**Transaction ID : SA17.293582**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARMSTRONG, ROBERTA, , ,**

Mailing Address 2276 MILL ROAD

City  
BINGHAMTON

State  
NY

Zip Code  
13903-6144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ARMSTRONG TELECOM

Occupation (for Individual)  
TELECOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.299856**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARMSTRONG, ROBERTA, , ,**

Mailing Address 2276 MILL ROAD

City  
BINGHAMTON

State  
NY

Zip Code  
13903-6144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ARMSTRONG TELECOM

Occupation (for Individual)  
TELECOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.300043**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

200.00

# **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)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARMSTRONG, ROBERTA, , ,**

Mailing Address 2276 MILL ROAD

City  
BINGHAMTON

State  
NY

Zip Code  
13903-6144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ARMSTRONG TELECOM

Occupation (for Individual)  
TELECOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.301821**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARMSTRONG, ROBERTA, , ,**

Mailing Address 2276 MILL ROAD

City  
BINGHAMTON

State  
NY

Zip Code  
13903-6144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ARMSTRONG TELECOM

Occupation (for Individual)  
TELECOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.301837**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARMSTRONG, ROBERTA, , ,**

Mailing Address 2276 MILL ROAD

City  
BINGHAMTON

State  
NY

Zip Code  
13903-6144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ARMSTRONG TELECOM

Occupation (for Individual)  
TELECOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.304270**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

125.00

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

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

FOR LINE NUMBER: PAGE 111 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ARMSTRONG, ROBERTA, , ,**

Mailing Address 2276 MILL ROAD

City  
BINGHAMTON

State  
NY

Zip Code  
13903-6144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ARMSTRONG TELECOM

Occupation (for Individual)  
TELECOM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2016

Transaction ID : SA17.304503

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ARON, ROBERT, , ,**

Mailing Address 855 WORCESTER ROAD

City  
FRAMINGHAM

State  
MA

Zip Code  
01701-5258

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

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  
05 / 22 / 2016

Transaction ID : SA17.308794

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ATHERTON, JOHN, , ,**

Mailing Address 16 COACHLIGHT DRIVE

City  
POUGHKEEPSIE

State  
NY

Zip Code  
12603-4241

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

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  
05 / 07 / 2016

Transaction ID : SA17.293759

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1300.00



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

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

FOR LINE NUMBER: PAGE 112 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ATKINSON, DORIS, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 11 / 2016</div> </div>
Mailing Address <b>88400 E SUNLAND AVE #38</b>			<b>Transaction ID : SA17.294196</b>
City <b>MESA</b>	State <b>AZ</b>	Zip Code <b>85208-</b>	Amount of Each Receipt this Period <div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	<input type="checkbox"/> NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ATWOOD, TOM, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 17 / 2016</div> </div>
Mailing Address <b>P.O BOX 890</b>			<b>Transaction ID : SA17.293508</b>
City <b>KENWOOD</b>	State <b>CA</b>	Zip Code <b>95452-0890</b>	Amount of Each Receipt this Period <div> <div>1000.00</div> </div>
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>INFORMATION REQUESTED PER BEST EFFORTS</b>		Occupation (for Individual) <b>INFORMATION REQUESTED PER BE</b>	<input type="checkbox"/> NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>1000.00</div> </div>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. AUGUSTINE, BRIAN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 06 / 2016</div> </div>
Mailing Address <b>P.O. BOX 480601</b>			<b>Transaction ID : SA17.293679</b>
City <b>CHARLOTTE</b>	State <b>NC</b>	Zip Code <b>28269-5305</b>	Amount of Each Receipt this Period <div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>ELITE TEAM REALTY</b>		Occupation (for Individual) <b>BROKER</b>	<input type="checkbox"/> NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AUTENZIO, ALFRED, , ,**

Mailing Address **9 ARBOR LANE**

City  
**WOBURN**

State  
**MA**

Zip Code  
**01801-3439**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.299824**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AUTENZIO, ALFRED, , ,**

Mailing Address **9 ARBOR LANE**

City  
**WOBURN**

State  
**MA**

Zip Code  
**01801-3439**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.302460**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. AUTENZIO, ALFRED, , ,**

Mailing Address **9 ARBOR LANE**

City  
**WOBURN**

State  
**MA**

Zip Code  
**01801-3439**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 30 / 2016**

**Transaction ID : SA17.306038**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**250.00**

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

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

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(check only one)

<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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AUTEN, DEAN, , ,**

Mailing Address **6122 ALTAMA AVE**

City  
**BRUNSWICK**

State  
**GA**

Zip Code  
**31525-0518**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.304618**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AZINGER, JANET, , ,**

Mailing Address **5500 GREENMONT**

City  
**VIENNA**

State  
**WV**

Zip Code  
**26105-3296**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**REAL ESTATE DEVELOPER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.295498**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BACHAND, RAYMOND R, , ,**

Mailing Address **1000 LOWRY ST. 2E**

City  
**DELRAY BEACH**

State  
**FL**

Zip Code  
**33483-7043**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295311**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1750.00**

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. BACHTELL, TOM, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3245 BIG SPRUCE WAY City PARK CITY State UT Zip Code 84098-5360 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) ME Occupation (for Individual) NATURAL RESOURCES PRODUCTIO 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 05 / 15 / 2016 <b>Transaction ID : SA17.296275</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. BAGNALL, HAROLD, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 602 STEWART RD. City STEVENSON State WA Zip Code 98648-6401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 13 / 2016 <b>Transaction ID : SA17.295754</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. BAKEWELL, LEE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6227 ORTO VASO AVE City LAS VEGAS State NV Zip Code 89131-3148 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 19 / 2016 <b>Transaction ID : SA17.302185</b> Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			800.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. BALL, JOHN, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1622 STEVENS AVE City ORLANDO State FL Zip Code 32806-7139 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) M & M WALL DESIGNS, INC. Occupation (for Individual) SELF EMPLOYED 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 05 / 31 / 2016 <b>Transaction ID : SA17.306453</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. BANTZ, LINDA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 18328 ROSAPENNY ROAD City CHARLOTTE State NC Zip Code 28278-8198 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 09 / 2016 <b>Transaction ID : SA17.293897</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. BARINEAU, JOHN, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 800 BERING DR. STE. 410 City HOUSTON State TX Zip Code 77057-2131 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RADNEY MANAGEMENT & INVESTMENTS Occupation (for Individual) PROPERTY MANAGENET Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.306178</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1750.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BARKLEY, JAMES, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2016 <b>Transaction ID : SA17.305937</b>	
Mailing Address 12239 WARRIOR TRAIL			Amount of Each Receipt this Period 250.00	
City KNOXVILLE	State TN	Zip Code 37922-5462	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BARMORE JR., PIERRE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2016 <b>Transaction ID : SA17.293975</b>	
Mailing Address 22516 SE32ND ST			Amount of Each Receipt this Period 100.00	
City SAMMAMISH	State WA	Zip Code 98075-	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BARMORE JR., PIERRE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2016 <b>Transaction ID : SA17.299792</b>	
Mailing Address 22516 SE32ND ST			Amount of Each Receipt this Period 25.00	
City SAMMAMISH	State WA	Zip Code 98075-	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BARMORE JR., PIERRE, , ,**

Mailing Address 22516 SE32ND ST

City  
SAMMAMISH

State  
WA

Zip Code  
98075-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.302186**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BARMORE JR., PIERRE, , ,**

Mailing Address 22516 SE32ND ST

City  
SAMMAMISH

State  
WA

Zip Code  
98075-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.306887**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BARNER, RICHARD, , ,**

Mailing Address 1202 SW 17TH ST

City  
OCALA

State  
FL

Zip Code  
34471-1231

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
UNEMPLOYED

Occupation (for Individual)  
UNEMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA17.294264**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1100.00

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

Use separate schedule(s)  
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<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BATTIN, JOHN, , ,**

Mailing Address **601 PAGET**

City  
**VENICE**

State  
**FL**

Zip Code  
**34293-4205**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 28 / 2016**

**Transaction ID : SA17.305949**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BEAMAN, LEE, , ,**

Mailing Address **1525 BROADWAY**

City  
**NASHVILLE**

State  
**TN**

Zip Code  
**37203-3121**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**BEAMAN AUTOMOTIVE**

Occupation (for Individual)  
**AUTO DEALER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295981**

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BELYAVSKI, ALEX, , ,**

Mailing Address **2626 EL CAMINO REAL**

City  
**REDWOOD CITY**

State  
**CA**

Zip Code  
**94061-3815**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**COAST LIGHTING**

Occupation (for Individual)  
**BUYER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294421**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**5750.00**

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

Use separate schedule(s)  
for each category of the  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BELYAVSKI, ALEX, , ,**

Mailing Address **2626 EL CAMINO REAL**

City  
**REDWOOD CITY**

State  
**CA**

Zip Code  
**94061-3815**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**COAST LIGHTING**

Occupation (for Individual)  
**BUYER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.303603**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BENNETT, MILFORD, , ,**

Mailing Address **576 APACHE TRAIL**

City  
**CHATSWORTH**

State  
**GA**

Zip Code  
**30705-6638**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.305499**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BERKLEY, JOHN, , ,**

Mailing Address **43 SADDLE DRIVE**

City  
**MOUNT LAUREL**

State  
**NJ**

Zip Code  
**08054-9631**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**GLAXOSMITHKLINE**

Occupation (for Individual)  
**PHARMACEUTICAL SALES**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.303609**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1000.00**



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BERMAN, HELENE, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 26 / 2016</div> </div>
Mailing Address <b>269 STURGES HWY</b>			<b>Transaction ID : SA17.305129</b>
City <b>WESTPORT</b>	State <b>CT</b>	Zip Code <b>06880-1722</b>	Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>
FEC ID number of contributing federal political committee. <b>C</b>		Occupation (for Individual) <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>RETIRED</b>		Aggregate Year-to-Date ▼ <div> <div></div> <div>500.00</div> </div>	NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BERMAN, STUART, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 13 / 2016</div> </div>
Mailing Address <b>909 LAKESIDE DR. SE</b>			<b>Transaction ID : SA17.300452</b>
City <b>GRAND RAPIDS</b>	State <b>MI</b>	Zip Code <b>49506-3403</b>	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <b>C</b>		Occupation (for Individual) <b>SECURITY ARCHITECT</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>STEELCASE INC.</b>		Aggregate Year-to-Date ▼ <div> <div></div> <div>250.00</div> </div>	NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BETZ, TOM, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 22 / 2016</div> </div>
Mailing Address <b>3240 DONNA DR.</b>			<b>Transaction ID : SA17.308793</b>
City <b>CARLSBAD</b>	State <b>CA</b>	Zip Code <b>92008-1124</b>	Amount of Each Receipt this Period <div> <div></div> <div>1000.00</div> </div>
FEC ID number of contributing federal political committee. <b>C</b>		Occupation (for Individual) <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>RETIRED</b>		Aggregate Year-to-Date ▼ <div> <div></div> <div>1000.00</div> </div>	NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. BHAGWAN, SUDHIR, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 13940 NW HARVEST LANE City PORTLAND State OR Zip Code 97229-3653 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 23 / 2016 <b>Transaction ID : SA17.302339</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. BICKEL, JAMES S, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 13018 FLAMINGO TERRACE City PALM BEACH GARDENS State FL Zip Code 33410-1309 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 23 / 2016 <b>Transaction ID : SA17.301915</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. BIEBER, CHARLENE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 14007 N ALPINE LANE City SPOKANE State WA Zip Code 99208-5505 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) FOLSOM ASSOCIATES Occupation (for Individual) SELF EMPLOYED 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 05 / 24 / 2016 <b>Transaction ID : SA17.306454</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BIGAR, PHILIPPE, , ,**

Mailing Address **55 EAST 76TH ST**

City  
**NEW YORK**

State  
**NY**

Zip Code  
**10021-1843**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**COMPOSER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.302752**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BILLINGS, MICHAEL, , ,**

Mailing Address **4500 ROLAND AVENUE  
507**

City  
**DALLAS**

State  
**TX**

Zip Code  
**75219-1617**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**TIMBER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.300453**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BISSET, MAXWELL, , ,**

Mailing Address **18495 SOUTH DIXIE HIGHWAY**

City  
**CUTLER BAY**

State  
**FL**

Zip Code  
**33157-6817**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**CERTIFIED MANAGEMENT SVC INC**

Occupation (for Individual)  
**AUDITOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.297130**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BLACK, SAMUEL P., , ,**

Mailing Address 121 E 2ND ST

City  
**ERIE**

State  
**PA**

Zip Code  
**16507-1501**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ERIE MANAGEMENT GROUP**

Occupation (for Individual)  
**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.307066**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BLAIR, MARK, , ,**

Mailing Address 2005 CAWOOD FALLS LANE

City

**KNOXVILLE**

State

**TN**

Zip Code

**37931-4065**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SMC CORPORATION OF AMERICA44950740**

Occupation (for Individual)  
**SALES MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA17.307049**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BLAND EICHELMANN, PEGGY, , ,**

Mailing Address 136 WESTCOURT LANE

City

**SAN ANTONIO**

State

**TX**

Zip Code

**78257-1272**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**450.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.302859**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1350.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BLAND EICHELMANN, PEGGY, , ,**

Mailing Address 136 WESTCOURT LANE

City  
SAN ANTONIO

State  
TX

Zip Code  
78257-1272

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.306050**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BLANTON, PHYLIS, , ,**

Mailing Address 4437 INTERSTATE 30 WEST

City  
CADDO MILLS

State  
TX

Zip Code  
75135-7642

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SUNWEST EXCAVATION INC

Occupation (for Individual)  
ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.302600**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BLOMSNESS, JEFFREY, , ,**

Mailing Address 15 WILLOW BAY DRIVE

City  
SOUTH BARRINGTON

State  
IL

Zip Code  
60010-7116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NORTH AMERICAN MIDWAY ENTERTAINMENT

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.306212**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BOCK, BENNIE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 / 16 / 2016</b>	
Mailing Address <b>162 LAKEVIEW BLVD</b>			<b>Transaction ID : SA17.300125</b>	
City <b>NEW BRAUNFELS</b>	State <b>TX</b>	Zip Code <b>78130-8102</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>SELF</b>		Occupation (for Individual) <b>ATTORNEY, RANCHER</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>500.00</b>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BOGNER, RICHARD, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 / 17 / 2016</b>	
Mailing Address <b>4 HUNTERS LANE</b>			<b>Transaction ID : SA17.301859</b>	
City <b>ROSLYN</b>	State <b>NY</b>	Zip Code <b>11576-1306</b>	Amount of Each Receipt this Period <b>100.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>300.00</b>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BOGOSIAN, CAROL, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 / 26 / 2016</b>	
Mailing Address <b>105 MARLAND ROAD SOUTH</b>			<b>Transaction ID : SA17.305110</b>	
City <b>COLORADO SPRINGS</b>	State <b>CO</b>	Zip Code <b>80906-4350</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>N/A</b>		Occupation (for Individual) <b>HOMEMAKER</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <b>250.00</b>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**850.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BOLING, THOMAS, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 26 / 2016</div> </div>	
Mailing Address 3591 118TH AVE NW			<b>Transaction ID : SA17.305022</b>	
City MINNEAPOLIS	State MN	Zip Code 55433-2662	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>225.00</div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BOLLINGER, JOHN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div>	
Mailing Address 287 N GRAND ST			<b>Transaction ID : SA17.296008</b>	
City ORANGE	State CA	Zip Code 92866-1513	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>250.00</div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BOLLINGER, JOHN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 21 / 2016</div> </div>	
Mailing Address 287 N GRAND ST			<b>Transaction ID : SA17.302213</b>	
City ORANGE	State CA	Zip Code 92866-1513	Amount of Each Receipt this Period <div> <div>50.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div>250.00</div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BOLLINGER, JOHN, , ,**

Mailing Address **287 N GRAND ST**

City  
**ORANGE**

State  
**CA**

Zip Code  
**92866-1513**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305085**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BOYD, RONALD, , ,**

Mailing Address **809 S. TYLER**

City  
**AMARILLO**

State  
**TX**

Zip Code  
**79101-3427**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**JEWELER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 09 / 2016**

**Transaction ID : SA17.299304**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BRADEN, CLARE, , ,**

Mailing Address **2618 PRIVATE ROAD 2410**

City  
**QUINLAN**

State  
**TX**

Zip Code  
**75474-7636**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**05 / 04 / 2016**

**Transaction ID : SA17.293617**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**650.00**



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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. BRADEN, CLARE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2618 PRIVATE ROAD 2410 City QUINLAN State TX Zip Code 75474-7636 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2016 <b>Transaction ID : SA17.299816</b> Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. BRADEN, CLARE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2618 PRIVATE ROAD 2410 City QUINLAN State TX Zip Code 75474-7636 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2016 <b>Transaction ID : SA17.301819</b> Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. BRADEN, CLARE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2618 PRIVATE ROAD 2410 City QUINLAN State TX Zip Code 75474-7636 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.304482</b> Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			150.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BRAJDIC, RODNEY, , ,**

Mailing Address **520 MOHAWK AVE**

City  
**FOND DU LAC**

State  
**WI**

Zip Code  
**54935-1940**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.306451**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BRANDRUP, DOUGLAS, , ,**

Mailing Address **52 LAUREL LEDGE CT.**

City  
**STAMFORD**

State  
**CT**

Zip Code  
**06903-1522**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.300124**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BRANDRUP, DOUGLAS, , ,**

Mailing Address **52 LAUREL LEDGE CT.**

City  
**STAMFORD**

State  
**CT**

Zip Code  
**06903-1522**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.302759**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BRIDGEMAN, ROBERT, , ,**

Mailing Address 16 SOUTH AVE W #114

City  
 CRANFORD

State  
 NJ

Zip Code  
 07016-2695

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 LUBEXPRESS

Occupation (for Individual)  
 PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.295207**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BRIGGS, MICHAEL, , ,**

Mailing Address 3406 THUNDER POINT

City  
 GAINESVILLE

State  
 GA

Zip Code  
 30506-1498

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305130**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BROADSTON, LEE S, , ,**

Mailing Address 6918 HIGHOVER DR.

City  
 CHANHASSEN

State  
 MN

Zip Code  
 55317-7567

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 BCS INC

Occupation (for Individual)  
 HEALTHCARE EXEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.296508**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BROCK, GARY, , ,**

Mailing Address 3533 RIXBORO RD #5

City  
 ATLANTA

State  
 GA

Zip Code  
 30326-3290

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.297469**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BROOKS, PAUL, , ,**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 GENERAL CONTRACTOR

Occupation (for Individual)  
 SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.295974**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BROWN, DENNIS, , ,**

Mailing Address P O BOX 208

City  
 SPRINGDALE

State  
 AR

Zip Code  
 72765-0208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **22** / **2016**

**Transaction ID : SA17.303628**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BRUDER, THOMAS, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 26 / 2016</div> </div>	
Mailing Address <b>600 REED ROAD</b> <b>SUITE 301</b>			<b>Transaction ID : SA17.304626</b>	
City <b>BROOMALL</b>	State <b>PA</b>	Zip Code <b>19008-3505</b>	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BRUNELLI, SAM, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 25 / 2016</div> </div>	
Mailing Address <b>404 SOUTH CENTER STREET</b>			<b>Transaction ID : SA17.305510</b>	
City <b>SHENANDOAH</b>	State <b>IA</b>	Zip Code <b>51601-1865</b>	Amount of Each Receipt this Period <div> <div>1000.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) <b>SELF</b>		Occupation (for Individual) <b>SELF EMPLOYED</b>	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>1000.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BRUNO, ARTHUR, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 20 / 2016</div> </div>	
Mailing Address <b>2727 S OCEAN BLVD</b> <b>906</b>			<b>Transaction ID : SA17.303625</b>	
City <b>HIGHLAND BEACH</b>	State <b>FL</b>	Zip Code <b>33487-1874</b>	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2000.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BUCCELLARI, RICHARD, , ,**

Mailing Address 1717 NORTH BAY SHORE DR.  
4241

City State Zip Code  
MIAMI FL 33132-1180

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.303837**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BUCKEL, HARRY, , ,**

Mailing Address 524 KETCH LANE

City State Zip Code  
LONGBOAT KEY FL 34228-3720

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA17.293727**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BUCKEL, HARRY, , ,**

Mailing Address 524 KETCH LANE

City State Zip Code  
LONGBOAT KEY FL 34228-3720

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.296459**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BUCKEL, HARRY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 20 / 2016</div> </div>	
Mailing Address <b>524 KETCH LANE</b>			<b>Transaction ID : SA17.301888</b>	
City <b>LONGBOAT KEY</b>	State <b>FL</b>	Zip Code <b>34228-3720</b>	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION		
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>400.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BUCKEL, HARRY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 25 / 2016</div> </div>	
Mailing Address <b>524 KETCH LANE</b>			<b>Transaction ID : SA17.304579</b>	
City <b>LONGBOAT KEY</b>	State <b>FL</b>	Zip Code <b>34228-3720</b>	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION		
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>400.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BUNNELL, RAY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 11 / 2016</div> </div>	
Mailing Address <b>11670 TWIN LAKES LN</b>			<b>Transaction ID : SA17.294251</b>	
City <b>SAN ANGELO</b>	State <b>TX</b>	Zip Code <b>76904-4089</b>	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION		
Name of Employer (for Individual) <b>SELF</b>		Occupation (for Individual) <b>RANCHER/INVESTER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BURKETT, PAUL, , ,**

Mailing Address 18124 WEDGE PARKWAY  
509

City  
RENO

State  
NV

Zip Code  
89511-8134

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SNOASPEN INSURANCE GROUP, INC.

Occupation (for Individual)  
INSURANCE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.300086**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BURLESON, STEVEN, , ,**

Mailing Address

City  
MIDLAND

State  
TX

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
BURLESON PETROLEUM

Occupation (for Individual)  
GEOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **09** / **2016**

**Transaction ID : SA17.299305**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BUTLER, DIANE, , ,**

Mailing Address 5455 LANDMARK PL  
UNIT 918

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80111-1957

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.296790**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00



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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BUZBEE, JACK, A., MR.,**

Mailing Address **200 E DOUGLAS ST**

City  
**DE SOTO**

State  
**IL**

Zip Code  
**62924-1512**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 29 / 2016**

**Transaction ID : SA17.306056**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CALE, JESSIE, , ,**

Mailing Address **449 NORTH ROCKINGHAM AVENUE**

City  
**LOS ANGELES**

State  
**CA**

Zip Code  
**90049-2637**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**NONE**

Occupation (for Individual)  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 26 / 2016**

**Transaction ID : SA17.304614**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CALLAHAN, LEONORA, , ,**

Mailing Address **625 ISLAND DR.**

City  
**PALM BEACH**

State  
**FL**

Zip Code  
**33480-4744**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294108**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**600.00**

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CALORI, ANTONIETTA, , ,**

Mailing Address **673 THAMES STREET**

City  
**NEWPORT**

State  
**RI**

Zip Code  
**02840-6738**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RESTAURANT**

Occupation (for Individual)  
**RESTAURANT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 15 / 2016**

**Transaction ID : SA17.296277**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CAMARENA, NORRIS, , ,**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.296129**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CAMPBELL, GRIER, , ,**

Mailing Address **1035 ANGELO CT**

City  
**ATLANTA**

State  
**GA**

Zip Code  
**30319-1041**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SUNTRUST ROBINSON HUMPHREY**

Occupation (for Individual)  
**BANKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.302753**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**2000.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CAMPBELL, JAMES, , ,**

Mailing Address 1511 S NORFOLK AVE

City  
TULSA

State  
OK

Zip Code  
74120-6221

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.296420**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CAMPBELL, LARRY, , ,**

Mailing Address 75 HUNTINGTON STREET

City  
COVINGTON

State  
GA

Zip Code  
30016-7151

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GOLDEN STATE FOODS

Occupation (for Individual)  
INDUSTRIAL MAINTENANCE MECHA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295764**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CAMPBELL, MARGARITA, , ,**

Mailing Address 31380 CONGRESSIONAL DR.

City  
TEMECULA

State  
CA

Zip Code  
92591-3976

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.304623**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CANNON, HENRY, , ,**

Mailing Address 916 DAYTON DR.

City  
**SCOTTSBORO**

State  
**AL**

Zip Code  
**35768-2814**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.296092**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CANNON, HENRY, , ,**

Mailing Address 916 DAYTON DR.

City  
**SCOTTSBORO**

State  
**AL**

Zip Code  
**35768-2814**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.301894**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CANON, JO, , ,**

Mailing Address 102 TIQUEWOOD CIRCLE

City  
**ABILENE**

State  
**TX**

Zip Code  
**79605-4937**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**HOMEMAKER**

Occupation (for Individual)  
**HUSBAND**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295957**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**500.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. CANON, JO, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 102 TIQUEWOOD CIRCLE City ABILENE State TX Zip Code 79605-4937 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HUSBAND Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2016 <b>Transaction ID : SA17.296412</b> Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. CARIERI, RICHARD, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 9540 COZYCROFT AVE. City CHATSWORTH State CA Zip Code 91311-5101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) LIFETECH RESOURCES Occupation (for Individual) BUSINESS OWNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2016 <b>Transaction ID : SA17.297169</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. CARLIN, REBECCA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 507 N CENTER ST City EBENSBURG State PA Zip Code 15931-1120 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 23 / 2016 <b>Transaction ID : SA17.303599</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1550.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CARLSON, RICHARD W, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 24 / 2016</div> </div>	
Mailing Address <b>4440 WILLARD AVE</b> <b>913</b>			<b>Transaction ID : SA17.305500</b>	
City <b>CHEVY CHASE</b>	State <b>MD</b>	Zip Code <b>20815-3611</b>	Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>TULIP HILL ENTERPRISES -OWNER</b>		Occupation (for Individual) <b>US AMBASSADOR (RET.)</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>500.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. CARRETTA, ELENA, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 19 / 2016</div> </div>	
Mailing Address <b>45 EAST 89TH STREET</b> <b>15F</b>			<b>Transaction ID : SA17.302343</b>	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10128-1251</b>	Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>500.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CARROLL, LARRY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>	
Mailing Address <b>784 LONG LAKE DRIVE</b>			<b>Transaction ID : SA17.306091</b>	
City <b>OVIEDO</b>	State <b>FL</b>	Zip Code <b>32765-8557</b>	Amount of Each Receipt this Period <div> <div></div> <div>1000.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div></div> <div>1000.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2000.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. CARTY, BILL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 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 (for Individual) CARTY & COMPANY, INC. Occupation (for Individual) EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 <b>Transaction ID : SA17.293663</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. CASTEEL, GARY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1350 STATE ROUTE 88 City MINDEN State NV Zip Code 89423-4626 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF Occupation (for Individual) RANCHING 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 05 / 21 / 2016 <b>Transaction ID : SA17.302333</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. CATHCART, DONALD, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 150 SPRING LAKE HILLS DRIVE City ALTAMONTE SPRINGS State FL Zip Code 32714-3423 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 14 / 2016 <b>Transaction ID : SA17.295870</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			600.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CAUDLE II, JOHN L., , ,**

Mailing Address 215 WINDING WAY

City  
 COLUMBIA

State  
 SC

Zip Code  
 29212-1349

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **09** / **2016**

**Transaction ID : SA17.299299**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHAFFEY, EUNICE, , ,**

Mailing Address 725 1ST STREET S  
 101

City  
 KIRKLAND

State  
 WA

Zip Code  
 98033-6577

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **14** / **2016**

**Transaction ID : SA17.299950**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CHAMBERS, GLENN, , ,**

Mailing Address 4515 ALDERSGATE RD.

City  
 MEMPHIS

State  
 TN

Zip Code  
 38117-3503

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.302330**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00



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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CHAMPAGNE, FRANCIS, , ,**

Mailing Address 43173 W. KIRKWOOD DR.

City  
CLINTON TOWNSHIP

State  
MI

Zip Code  
48038-1225

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305944**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHAPOTON, RONALD, , ,**

Mailing Address 2002 20TH ST  
A-102

City  
KENNER

State  
LA

Zip Code  
70062-6289

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **09** / **2016**

**Transaction ID : SA17.299297**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CHASE, LINDA, , ,**

Mailing Address 313 EAST 74 STREET  
1

City  
NEW YORK

State  
NY

Zip Code  
10021-3701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
REAL ESTATE MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.302433**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CHAVEZ, KATHLEEN, , ,**

Mailing Address 144 COTTONWOOD

City  
 GRANTS

State  
 NM

Zip Code  
 87020-4215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SLS NM

Occupation (for Individual)  
 MANAGING OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **23** / **2016**

**Transaction ID : SA17.302778**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHESTERMAN, JEANETTE B, , ,**

Mailing Address 201 SINCLAIR ST.

City  
 NORFOLK

State  
 VA

Zip Code  
 23505-4357

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.302432**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CHITWOOD, DEWAYNE, , ,**

Mailing Address 95 HEDGES RD.

City  
 ABILENE

State  
 TX

Zip Code  
 79605-6514

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 WES-TEX HOLDINGS

Occupation (for Individual)  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.302349**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00

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

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CHRYSLER, PHILLIP, , ,**

Mailing Address 2230 DORADO AVENUE

City  
 DAVIE

State  
 FL

Zip Code  
 33324-6317

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 TEAM NATIONAL, INC.

Occupation (for Individual)  
 SALES & MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305120**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CIOLELLI, RUDY, , ,**

Mailing Address 13530 SABAL POINT DR.

City

FORT MYERS

State

FL

Zip Code

33905-5862

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294636**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CLARK, CINDY, , ,**

Mailing Address 4340 E. WAIOLA LOOP

City

KIHEI

State

HI

Zip Code

96753-8452

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.299954**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 148 OF 389

(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CLARK, JANICE M, , ,**

Mailing Address 9251 S W 94TH LOOP

City  
OCALA

State  
FL

Zip Code  
34481-4606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **06** / **2016**

**Transaction ID : SA17.293687**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CLARK, JANICE M, , ,**

Mailing Address 9251 S W 94TH LOOP

City  
OCALA

State  
FL

Zip Code  
34481-4606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA17.300338**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CLARK, JANICE M, , ,**

Mailing Address 9251 S W 94TH LOOP

City  
OCALA

State  
FL

Zip Code  
34481-4606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.301870**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CLEVELAND, BARBARA, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 13 / 2016</div> </div>
Mailing Address 10402 FOREST GLEN PLACE			Transaction ID : <b>SA17.296172</b>
City POWELL	State OH	Zip Code 43065-8764	Amount of Each Receipt this Period <div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>  <b>NON CONTRIBUTION ACCOUNT</b>
Name of Employer (for Individual) SROF LLC		Occupation (for Individual) SELF EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>350.00</div> </div>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. CLEVELAND, BARBARA, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>
Mailing Address 10402 FOREST GLEN PLACE			Transaction ID : <b>SA17.304597</b>
City POWELL	State OH	Zip Code 43065-8764	Amount of Each Receipt this Period <div> <div>100.00</div> </div>
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>  <b>NON CONTRIBUTION ACCOUNT</b>
Name of Employer (for Individual) SROF LLC		Occupation (for Individual) SELF EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>350.00</div> </div>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. COATS, DONALD, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 19 / 2016</div> </div>
Mailing Address 12574 DEERFIELD CT			Transaction ID : <b>SA17.296827</b>
City COUNCIL BLUFFS	State IA	Zip Code 51503-8504	Amount of Each Receipt this Period <div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>  <b>NON CONTRIBUTION ACCOUNT</b>
Name of Employer (for Individual) REAL ESTATE		Occupation (for Individual) SELF EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CODDINGTON, CHAN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div>
Mailing Address 141 OAKWOOD DR.			<b>Transaction ID : SA17.295193</b>
City MURRAY HILL	State NJ	Zip Code 07974-2116	Amount of Each Receipt this Period <div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CHANS ALTERNATIVE RISK TRANSFER IDEAS,		Occupation (for Individual) CONSULTANT-BOARD MEMBER 2 BL	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>	<b>NON CONTRIBUTION ACCOUNT</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. COKER, HENRY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div>
Mailing Address 613 RIVER ROUTE			<b>Transaction ID : SA17.295128</b>
City MAGNOLIA SPRINGS	State AL	Zip Code 36555-9727	Amount of Each Receipt this Period <div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) AIRGAS		Occupation (for Individual) EXECUTIVE	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>	<b>NON CONTRIBUTION ACCOUNT</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. COLLIER, HOWARD, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 14 / 2016</div> </div>
Mailing Address 581 JOLLY ROGERS RD			<b>Transaction ID : SA17.300364</b>
City ABILENE	State TX	Zip Code 79601-2709	Amount of Each Receipt this Period <div> <div>500.00</div> </div>
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	<b>CONTRIBUTION</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>600.00</div> </div>	<b>NON CONTRIBUTION ACCOUNT</b>

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

Use separate schedule(s)  
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<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. COLLIER, HOWARD, , ,**

Mailing Address **581 JOLLY ROGERS RD**

City  
**ABILENE**

State  
**TX**

Zip Code  
**79601-2709**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305060**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. COLLINS, PETER, , ,**

Mailing Address **2501 S MACDILL AVE**

City  
**TAMPA**

State  
**FL**

Zip Code  
**33629-7217**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**FINANCE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.302347**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. COOK, MARCHITA, , ,**

Mailing Address **43 SILVER IRIS WAY**

City  
**SPRING**

State  
**TX**

Zip Code  
**77382-2714**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**NONE**

Occupation (for Individual)  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.307052**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1350.00**

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. COOL, JAMES, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 610 W 2ND ST City NEWPORT State WA Zip Code 99156- FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.307062</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. COOL, JAMES, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 610 W 2ND ST City NEWPORT State WA Zip Code 99156- FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.307063</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. COOPER, BRIAN, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3501 NW 40TH TERRACE City GAINESVILLE State FL Zip Code 32606-6165 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) UNIV FLORIDA Occupation (for Individual) PROFESSOR 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 05 / 31 / 2016 <b>Transaction ID : SA17.305507</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			2500.00
<b>TOTAL</b> 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

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(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. COOPER, ROBERT, , ,**

Mailing Address 14944 LA CUMBRE DRIVE

City  
 PACIFIC PALISADES

State  
 CA

Zip Code  
 90272-4456

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.304635**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. COOPER, TOMMY, , ,**

Mailing Address 16916 KETCH COURT

City  
 LEWES

State  
 DE

Zip Code  
 19958-5014

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 COOPER REALTY ASSOCIATES

Occupation (for Individual)  
 PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305112**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. COPPOLA, STEVEN, , ,**

Mailing Address 31 NOME AVENUE

City  
 STATEN ISLAND

State  
 NY

Zip Code  
 10314-6027

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 APB SECURITY SYSTEMS, INC.

Occupation (for Individual)  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.303616**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CORNBLATT, SYLVAN, , ,**

Mailing Address **960 FELL ST UNIT 102**

City  
**BALTIMORE**

State  
**MD**

Zip Code  
**21231-3544**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)

**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 28 / 2016**

**Transaction ID : SA17.297479**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CORRAO, LUD, , ,**

Mailing Address **P.O. BOX 12907**

City  
**RENO**

State  
**NV**

Zip Code  
**89510-2907**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**RETIRED**

Occupation (for Individual)

**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA17.294034**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. COSE, DON, , ,**

Mailing Address **P.O. BOX 326**

City  
**TRACY**

State  
**CA**

Zip Code  
**95378-0326**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**RETIRED**

Occupation (for Individual)

**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.301913**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1500.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. COURTE, ELLIS, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1719 LOFTY MAPLE TRAIL City KINGWOOD State TX Zip Code 77345-1937 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 19 / 2016 <b>Transaction ID : SA17.302751</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. COURTE, ELLIS, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1719 LOFTY MAPLE TRAIL City KINGWOOD State TX Zip Code 77345-1937 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 25 / 2016 <b>Transaction ID : SA17.305488</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. COX, SANDY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6 LONG CHAMP COURT City ODESSA State TX Zip Code 79762-5400 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 <b>Transaction ID : SA17.306090</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CREMER, MICHAEL, , ,**

Mailing Address 1482 HOLLOW FORK COVE

City  
GERMANTOWN

State  
TN

Zip Code  
38138-1719

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.308829**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CRESSWELL, RONALD, , ,**

Mailing Address P.O. BOX247

City  
SAINT PETERS

State  
PA

Zip Code  
19470-0247

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305947**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CROMER, MARSHALL, , ,**

Mailing Address 4701 OAKPORT STREE

City  
OAKLAND

State  
CA

Zip Code  
94601-4906

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CROMER MATERIAL HANDLING

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **26** / **2016**

**Transaction ID : SA17.305494**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CROSSLAND, RALPH, , ,**

Mailing Address 11061 E. TAMARISK WAY

City  
**SCOTTSDALE**

State  
**AZ**

Zip Code  
**85262-3287**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**CROSSLAND INS LLC**

Occupation (for Individual)  
**EXC.**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.296664**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROUCH, RODDIE, , ,**

Mailing Address 2145 RIVER FALLS DR.

City  
**ROSWELL**

State  
**GA**

Zip Code  
**30076-5122**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.295774**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CULBERSON, S FRANK, , ,**

Mailing Address 2680 MISTY MEADOW

City  
**PROSPER**

State  
**TX**

Zip Code  
**75078-9745**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RIMKUS CONSULTING GROUP**

Occupation (for Individual)  
**EXECUTIVE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305951**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**2500.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DANSE, ILENE, , ,**

Mailing Address **PO BOX 578**

City  
**NOVATO**

State  
**CA**

Zip Code  
**94948-0578**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**N/A**

Occupation (for Individual)  
**PHYSICIAN/ARTIST/GREAT IDEA PEF**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.302346**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DAVID, EDWARD K, , ,**

Mailing Address **911 BRAZOS STREET**

City  
**ROSWELL**

State  
**NM**

Zip Code  
**88201-3326**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**DAVID PETROLEUM CORP.**

Occupation (for Individual)  
**GEOLOGIST**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.296030**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DAVID, EDWARD K, , ,**

Mailing Address **911 BRAZOS STREET**

City  
**ROSWELL**

State  
**NM**

Zip Code  
**88201-3326**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**DAVID PETROLEUM CORP.**

Occupation (for Individual)  
**GEOLOGIST**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.297128**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1300.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DAVIS, BRENT, , ,**

Mailing Address **2020 E DALE**

City  
**SPRINGFIELD**

State  
**MO**

Zip Code  
**65803-4638**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)

**INFORMATION REQUESTED PER BE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**05 / 28 / 2016**

**Transaction ID : SA17.297478**

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DAVIS, LARRY, , ,**

Mailing Address **7341 SEAN LANE**

City

**NORTH FORT MYERS**

State

**FL**

Zip Code

**33917-3322**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**WD MUSIC**

Occupation (for Individual)

**BUSINESS OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.305114**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DAVIS, T. WAYNE, , ,**

Mailing Address **1910 SAN. MARCO BLVD**

City

**JACKSONVILLE**

State

**FL**

Zip Code

**32207-3204**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

**DAVIS FOUNDATION**

Occupation (for Individual)

**ATTORNEY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.302345**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**5750.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DEDRICK, WARREN, , ,**

Mailing Address 727 WASHINGTON ST

City  
 KEY WEST

State  
 FL

Zip Code  
 33040-4777

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 MARLIN CAPITOL

Occupation (for Individual)  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

**05** / **06** / **2016**

**Transaction ID : SA17.293693**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DEDRICK, WARREN, , ,**

Mailing Address 727 WASHINGTON ST

City  
 KEY WEST

State  
 FL

Zip Code  
 33040-4777

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 MARLIN CAPITOL

Occupation (for Individual)  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.303631**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DEGIVE, D B, , ,**

Mailing Address 3500 GALT OCEAN DR.  
 310

City  
 FORT LAUDERDALE

State  
 FL

Zip Code  
 33308-6823

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.299951**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00



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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. DELFER, FRANK, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 07 / 2016</div> </div>	
Mailing Address 538 DALE DR.			<b>Transaction ID : SA17.293783</b>	
City INCLINE VLG	State NV	Zip Code 89451-8312	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) DST OUTPUT		Occupation (for Individual) CTO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. DENN, SANDY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 17 / 2016</div> </div>	
Mailing Address P.O BOX 470			<b>Transaction ID : SA17.293510</b>	
City WILLOWS	State CA	Zip Code 95988-0470	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. DEROSE, ROBERT, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 22 / 2016</div> </div>	
Mailing Address POB 8167			<b>Transaction ID : SA17.303612</b>	
City RANCHO SANTA FE	State CA	Zip Code 92067-8167	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<div> <div>1000.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only).....▶	<div> <div></div> </div>

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIGAN, MARY ANN, , ,**

Mailing Address P.O. BOX 337

City  
**SCITUATE**

State  
**MA**

Zip Code  
**02066-0337**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.300365**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DODGE, BRUCE, , ,**

Mailing Address 1788 N HERCULES AVE

City  
**CLEARWATER**

State  
**FL**

Zip Code  
**33765-1111**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**BOULEVARD AWNING CO.**

Occupation (for Individual)  
**OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA17.305497**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DONELSON, DAVID, , ,**

Mailing Address 1 HALTON GREEN WAY

City  
**GREENVILLE**

State  
**SC**

Zip Code  
**29607-6606**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**SELF**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.303618**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DORFMAN, JOEL, , ,**

Mailing Address 1771 BLUE HERON CT.

City  
BLOOMFIELD HILLS

State  
MI

Zip Code  
48302-0703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NORTH STAR PARTNERS, LLC

Occupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.306351**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DORGAN, JAMES, , ,**

Mailing Address 7764 DORCHESTER RD

City  
BOYNTON BEACH

State  
FL

Zip Code  
33472-5005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.305484**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DOWD, JOHN, , ,**

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 (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305956**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DOYLE, MICHAEL, , ,**

Mailing Address 9145 FOREST DOWNS RD.

City  
GERMANTOWN

State  
TN

Zip Code  
38138-8606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE PALLET FACTORY INC.

Occupation (for Individual)  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305946**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DRAKE, REBECCA B., , ,**

Mailing Address 155 MCLENDON, DRIVE

City  
RAYMOND

State  
MS

Zip Code  
39154-7813

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305134**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DRAPER, THOMAS, , ,**

Mailing Address 1 THE SQUARE

City  
MILTON

State  
DE

Zip Code  
19968-1307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ENTREPRENEUR

Occupation (for Individual)  
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **10** / **2016**

**Transaction ID : SA17.309071**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUNCAN, KENNETH W., , ,**

Mailing Address 444 HWY. 136

City  
TRENTON

State  
GA

Zip Code  
30752-4803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05** / **07** / **2016**

**Transaction ID : SA17.293823**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUNCAN, KENNETH W., , ,**

Mailing Address 444 HWY. 136

City  
TRENTON

State  
GA

Zip Code  
30752-4803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.299896**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNCAN, KENNETH W., , ,**

Mailing Address 444 HWY. 136

City  
TRENTON

State  
GA

Zip Code  
30752-4803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305097**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

225.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DWYER, CLEMENT, , ,**

Mailing Address **77 HANOVER ST**  
**UNIT 20**

City  
**PORTSMOUTH**

State  
**NH**

Zip Code  
**03801-3773**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**URSA ADVISORS INC**

Occupation (for Individual)  
**INSURANCE INVESTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.308736**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. EARHART, ALAN, , ,**

Mailing Address **1370 PRITCHETT CT**

City  
**LOS ALTOS**

State  
**CA**

Zip Code  
**94024-5711**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.300378**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. EDWARDS, DAVID, , ,**

Mailing Address **112 GRADY WHITTON RD**

City  
**BREMEN**

State  
**GA**

Zip Code  
**30110-3561**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**COSTCO WHOLESALE**

Occupation (for Individual)  
**ADMINISTRATION**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 14 / 2016**

**Transaction ID : SA17.295838**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1750.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. EDWARDS, HARVEY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2508 EL VAQUERO DR. City MODESTO State CA Zip Code 95355-7948 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) MERITAGE HOMES Occupation (for Individual) REAL ESTATE BROKER 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 05 / 24 / 2016 <b>Transaction ID : SA17.306267</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. EDWARDS, NICK, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3820 RIVER ROAD City WIMBERLEY State TX Zip Code 78676-5141 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 27 / 2016 <b>Transaction ID : SA17.305498</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. EL GAMMAL, BETTY SUE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2031 BRIDGELAKE DRIVE City BIRMINGHAM State AL Zip Code 35244-1421 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2016 <b>Transaction ID : SA17.300366</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ELDRIDGE, ANNE, , ,**

Mailing Address **2864 KINGSLAND CT.,SE**

City  
**ATLANTA**

State  
**GA**

Zip Code  
**30339-4253**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.302344**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ELLIOTT, RODNEY, , ,**

Mailing Address **1315 E. MAIN ST**

City  
**SANTA PAULA**

State  
**CA**

Zip Code  
**93060-2925**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**R&R PIPELINE INC**

Occupation (for Individual)  
**CONTRACTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305953**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ERSHIG, A. HERBERT, , ,**

Mailing Address **22 SHOREWOOD DR.**

City  
**BELLINGHAM**

State  
**WA**

Zip Code  
**98225-7752**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.295790**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**



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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. EVANS, GLEN, , ,**

Mailing Address **4 MOLOKAI LANE**

City  
**FAIRHOPE**

State  
**AL**

Zip Code  
**36532-1116**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.296676**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. EVANS, GLEN, , ,**

Mailing Address **4 MOLOKAI LANE**

City  
**FAIRHOPE**

State  
**AL**

Zip Code  
**36532-1116**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.306177**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. EVANS, JEANNETTE M, , ,**

Mailing Address **P.O. BOX 70**

City  
**COWICHEYAKIMA**

State  
**WA**

Zip Code  
**98907-0070**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**EVANSFRUITCO, INC.**

Occupation (for Individual)  
**OFFICE MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295034**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**850.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FABISZAK, EDWARD, W., ,**

Mailing Address **80 S. ROYAL OAKS DRIVE**

City  
**BRISTOL**

State  
**IL**

Zip Code  
**60512-9705**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**MICRO SURFACE CORPORATION**

Occupation (for Individual)  
**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.303598**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FALSEY, RICHARD, , ,**

Mailing Address **43609 N 48TH DR.**

City  
**NEW RIVER**

State  
**AZ**

Zip Code  
**85087-3041**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.296631**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FAM, FERDINAND, , ,**

Mailing Address **2895 ROYSTON PL**

City  
**BEVERLY HILLS**

State  
**CA**

Zip Code  
**90210-1017**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**WESTCHESTER MEDICAL PLAZA**

Occupation (for Individual)  
**INVESTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.297051**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FARB, FAY RETA, , ,**

Mailing Address P.O. BOX 280 (614 PIPER ST)

City  
INDEPENDENCE

State  
OR

Zip Code  
97351-0280

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.299925**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FARB, FAY RETA, , ,**

Mailing Address P.O. BOX 280 (614 PIPER ST)

City  
INDEPENDENCE

State  
OR

Zip Code  
97351-0280

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.306166**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FARB, FAY RETA, , ,**

Mailing Address P.O. BOX 280 (614 PIPER ST)

City  
INDEPENDENCE

State  
OR

Zip Code  
97351-0280

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.306167**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00

# **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)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FARGHER, LAWRENCE, , ,**

Mailing Address 830 KIELY BLVD #200

City  
**SANTA CLARA**

State  
**CA**

Zip Code  
**95051-5373**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**REALCOM ASSOCIATES (SELF)**

Occupation (for Individual)  
**REALTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**700.00**

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA17.293702**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FARGHER, LAWRENCE, , ,**

Mailing Address 830 KIELY BLVD #200

City  
**SANTA CLARA**

State  
**CA**

Zip Code  
**95051-5373**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**REALCOM ASSOCIATES (SELF)**

Occupation (for Individual)  
**REALTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**700.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.299854**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FARGHER, LAWRENCE, , ,**

Mailing Address 830 KIELY BLVD #200

City  
**SANTA CLARA**

State  
**CA**

Zip Code  
**95051-5373**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**REALCOM ASSOCIATES (SELF)**

Occupation (for Individual)  
**REALTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**700.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.300073**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**300.00**

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

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

FOR LINE NUMBER: PAGE 173 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. FARGHER, LAWRENCE, , ,

Mailing Address 830 KIELY BLVD #200

City  
 SANTA CLARA

State  
 CA

Zip Code  
 95051-5373

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 REALCOM ASSOCIATES (SELF)

Occupation (for Individual)  
 REALTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2016

Transaction ID : SA17.304551

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FARINA, JOSEPH, , ,

Mailing Address 17 OLD SALEM RD

City  
 WEST ORANGE

State  
 NJ

Zip Code  
 07052-3115

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 CONSULTANT STONE

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  
 05 / 29 / 2016

Transaction ID : SA17.305959

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FAWN, KENN, , ,

Mailing Address 20 RANCH CREEK WAY

City  
 MAGNOLIA

State  
 TX

Zip Code  
 77354-6487

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

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  
 05 / 17 / 2016

Transaction ID : SA17.302491

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 174 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FEINBERG, BERNARD, , ,**

Mailing Address **60 EAST END AVE**  
**23B**

City  
**NEW YORK**

State  
**NY**

Zip Code  
**10028-7907**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**TIGER BUTTON CO INC**

Occupation (for Individual)  
**BUSINESSMAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.305501**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FIELDING, LYNN, , ,**

Mailing Address **116 VISTA WAY**

City  
**KENNEWICK**

State  
**WA**

Zip Code  
**99336-3119**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**ATTORNEY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.302749**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FISHMAN, NOLIE, , ,**

Mailing Address **132 NORTH LAYTON DRIVE**

City  
**LOS ANGELES**

State  
**CA**

Zip Code  
**90049-2059**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305954**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

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

FOR LINE NUMBER: PAGE 175 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FITZGERALD, WILLIAM, , ,**

Mailing Address 1304 N 139 ST

City  
**OMAHA**

State  
**NE**

Zip Code  
**68154-5104**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.300362**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FLEMING, DAN, , ,**

Mailing Address 694 INVERNESS STREET

City  
**OREGON**

State  
**WI**

Zip Code  
**53575-3848**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**FLEMING DEVELOPMENT**

Occupation (for Individual)  
**REAL ESTATE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.305487**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FLOWERS, JEFF, , ,**

Mailing Address P.O. BOX 150597

City  
**ALTAMONTE SPRINGS**

State  
**FL**

Zip Code  
**32715-0597**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**FLOWERS CHEMICAL LABS**

Occupation (for Individual)  
**CHEMIST**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.306274**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 176 OF 389  
(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FODOR, JOSEPH, , ,**

Mailing Address 2100 GLENMERE RD

City  
UPPER ARLINGTONState  
OHZip Code  
43220-4731FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
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
05		27		2016

Transaction ID : SA17.306089

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FOWLER, JO ANN, , ,**

Mailing Address P.O. BOX 6842

City  
MOBILEState  
ALZip Code  
36660-0842FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CEFCO NATIONAL CLAIMSOccupation (for Individual)  
VICE PRESIDENT

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
05		16		2016

Transaction ID : SA17.300085

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FREITAG, HENRIK, , ,**Mailing Address 151 W. WING ST.  
SUITE 408City  
ARLINGTON HTSState  
ILZip Code  
60005-5814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROYAL DIE AND STAMPINGOccupation (for Individual)  
TOOL MAKER

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
05		12		2016

Transaction ID : SA17.294472

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

1000.00



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

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

FOR LINE NUMBER: PAGE 177 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FRODSHAM, WILLIAM, , ,**

Mailing Address 217 S. 93RD AVE

City  
 YAKIMA

State  
 WA

Zip Code  
 98908-9517

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 PALAZZO PROPERTIES, LTD

Occupation (for Individual)  
 CONSTRUCTION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.295398**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. FUCHS, MARTHA, , ,**

Mailing Address P.O. BOX 946

City  
 POINT CLEAR

State  
 AL

Zip Code  
 36564-0946

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305493**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GAMBLE, KENNETH, , ,**

Mailing Address 175 HUGUENOT ST  
 PH 501

City  
 NEW ROCHELLE

State  
 NY

Zip Code  
 10801-7761

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF EMPLOYED

Occupation (for Individual)  
 INSURANCE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

**05** / **10** / **2016**

**Transaction ID : SA17.294014**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00

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

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

FOR LINE NUMBER: PAGE 178 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. GAMBLE, KENNETH, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 17 / 2016</div> </div> <b>Transaction ID : SA17.303630</b>	
Mailing Address 175 HUGENOT ST PH 501				
City NEW ROCHELLE	State NY	Zip Code 10801-7761		
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <div>1000.00</div>	
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) INSURANCE BROKER	<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 ▼ <div>2000.00</div>	NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. GARCIA, MANUEL, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 13 / 2016</div> </div> <b>Transaction ID : SA17.300116</b>	
Mailing Address 941 TUSKAWILLA TRAIL				
City WINTER SPRINGS	State FL	Zip Code 32708-4023		
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <div>100.00</div>	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) 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 ▼ <div>350.00</div>	NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. GARNESSE, SHIRLEY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 18 / 2016</div> </div> <b>Transaction ID : SA17.296613</b>	
Mailing Address 2614 SPRUCEWOOD ST				
City ANCHORAGE	State AK	Zip Code 99508-3979		
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <div>250.00</div>	
Name of Employer (for Individual) SELF		Occupation (for Individual) ACCOUNTING	<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 ▼ <div>500.00</div>	NON CONTRIBUTION ACCOUNT	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00

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

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

FOR LINE NUMBER: PAGE 179 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GARNES, SHIRLEY, , ,**

Mailing Address 2614 SPRUCEWOOD ST

City  
 ANCHORAGE

State  
 AK

Zip Code  
 99508-3979

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.296618**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GARTHWAIT, JR., BOB, , ,**

Mailing Address P.O. BOX 1367

City  
 WATERBURY

State  
 CT

Zip Code  
 06721-1367

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 CLY-DEL MFG. COMPANY

Occupation (for Individual)  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305963**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GAST, KENTON, , ,**

Mailing Address 5759 CHARTEROAK DRIVE

City  
 CINCINNATI

State  
 OH

Zip Code  
 45236-2013

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.306999**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. GAST, KENTON, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 24 / 2016</div> </div>	
Mailing Address 5759 CHARTEROAK DRIVE			Transaction ID : <b>SA17.307046</b>	
City CINCINNATI	State OH	Zip Code 45236-2013	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>350.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. GATTO, PAMELA, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>	
Mailing Address 339 COCOA AVE			Transaction ID : <b>SA17.307058</b>	
City INDIALANTIC	State FL	Zip Code 32903-3407	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) MIKE GATTO, INC DBA GATTO'S TIRES AND		Occupation (for Individual) BUSINESS OWNER - TIRE DEALER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. GEDNEY, DAVID, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 17 / 2016</div> </div>	
Mailing Address 104 THORNBLADE BLVD			Transaction ID : <b>SA17.302340</b>	
City GREER	State SC	Zip Code 29650-4426	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		
			NON CONTRIBUTION ACCOUNT	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1250.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. GENZER, FRANK, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 145 SAINT JUDE STREET City BILOXI State MS Zip Code 39530-3602 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) SELF Occupation (for Individual) ARCHITECT 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 05 / 25 / 2016 <b>Transaction ID : SA17.305506</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. GILES, ELIZABETH, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 18500 FALLING WATER WAY City RIVERSIDE State CA Zip Code 92504-9630 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST 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 05 / 04 / 2016 <b>Transaction ID : SA17.293600</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. GILL, DAVID, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 210 S LOIS LN City RICHARDSON State TX Zip Code 75081-4213 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 31 / 2016 <b>Transaction ID : SA17.305945</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GIRDNER, LORI, , ,**

Mailing Address **2165 ARTESIAN RD**

City  
**EAGLE**

State  
ID

Zip Code  
**83616-5646**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.307055**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GISH, DOUGLAS, , ,**

Mailing Address **18018 MELROSE DR.**

City

**BUCYRUS**

State  
KS

Zip Code  
**66013-9090**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**DELOITTE**

Occupation (for Individual)  
**CONSULTANT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 22 / 2016**

**Transaction ID : SA17.302336**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GONZALEZ, FRANK, , ,**

Mailing Address **1693 SE SAINT LUCI BLVD**

City

**STUART**

State  
FL

Zip Code  
**34996-4204**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**BEV SMITH AOTOMOTIVE.**

Occupation (for Individual)  
**TOYOTA KIA DEALER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295266**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GONZALEZ-RODRIGUEZ, RAMON, , ,**

Mailing Address **CHAPIN G20 PLAYA**

City  
**SALINAS**

State  
**PR**

Zip Code  
**00751-2854**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**GONZALEZ AGRO, INC**

Occupation (for Individual)  
**FARMER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.301909**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GOODRICH, TERRY, , ,**

Mailing Address **P.O. BOX 598**

City  
**BANKS**

State  
**OR**

Zip Code  
**97106-0598**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ME**

Occupation (for Individual)  
**BUILDER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294332**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GOODYEAR, PRISCILLA, , ,**

Mailing Address **10042 SIGNET CIRCLE**

City  
**HUNTINGTON BEACH**

State  
**CA**

Zip Code  
**92646-6631**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.296707**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GOTTSCHALK, GUY, A., ,**

Mailing Address **412 DALY AVENUE**

City  
**WISCONSIN RAPIDS**

State  
**WI**

Zip Code  
**54494-4744**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**GOTTSCHALK CRANBERRY, INC.**

Occupation (for Individual)  
**FARMER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 15 / 2016**

**Transaction ID : SA17.300415**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GOVINDARAJ, CHITOOR, , ,**

Mailing Address **370 OCEAN TERRACE STATEN ISLAND NY**

City  
**STATEN ISLAND**

State  
**NY**

Zip Code  
**10301-**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**BATH BEACH MEDICAL PC**

Occupation (for Individual)  
**DOCTOR OF MEDICINE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 22 / 2016**

**Transaction ID : SA17.302750**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GRAMMER, KATHRYN, , ,**

Mailing Address **200 S INTERLACHEN AVE**  
**#K300**

City  
**WINTER PARK**

State  
**FL**

Zip Code  
**32789-4414**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294140**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**



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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. GREAVES, WILLIAM, , ,**

Mailing Address **8851N BAYSIDE DR.**

City  
**MILWAUKEE**

State  
**WI**

Zip Code  
**53217-1910**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ABPM**

Occupation (for Individual)  
**PHYSICIAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 22 / 2016**

**Transaction ID : SA17.303843**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GREYTAK, DAVID B., , ,**

Mailing Address **831 WRIGHTS NECK RD**

City  
**CENTREVILLE**

State  
**MD**

Zip Code  
**21617-2615**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.305123**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GREYTAK, DAVID B., , ,**

Mailing Address **831 WRIGHTS NECK RD**

City  
**CENTREVILLE**

State  
**MD**

Zip Code  
**21617-2615**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.305128**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1500.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. GRIFFIN, PETER, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 16 / 2016</div> </div>	
Mailing Address <b>8 WINDABOUT DR.</b>			<b>Transaction ID : SA17.299860</b>	
City <b>GREENWICH</b>	State <b>CT</b>	Zip Code <b>06831-3702</b>	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer (for Individual) <b>LEXUS OF GREENWICH</b>		Occupation (for Individual) <b>BUSINESS OWNER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>400.00</div> </div>		
			<b>NON CONTRIBUTION ACCOUNT</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. GRIFFIN, PETER, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 24 / 2016</div> </div>	
Mailing Address <b>8 WINDABOUT DR.</b>			<b>Transaction ID : SA17.306443</b>	
City <b>GREENWICH</b>	State <b>CT</b>	Zip Code <b>06831-3702</b>	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer (for Individual) <b>LEXUS OF GREENWICH</b>		Occupation (for Individual) <b>BUSINESS OWNER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>400.00</div> </div>		
			<b>NON CONTRIBUTION ACCOUNT</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. GUM, GAYLE K, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 25 / 2016</div> </div>	
Mailing Address <b>540 CULEBRA ROAD</b>			<b>Transaction ID : SA17.305441</b>	
City <b>SAN ANTONIO</b>	State <b>TX</b>	Zip Code <b>78201-6419</b>	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer (for Individual) <b>ACME SCREEN MFG.</b>		Occupation (for Individual) <b>OWNER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>455.00</div> </div>		
			<b>NON CONTRIBUTION ACCOUNT</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<div> <div>300.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only).....▶	<div> </div>

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. GUM, GAYLE K, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 540 CULEBRA ROAD City SAN ANTONIO State TX Zip Code 78201-6419 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) ACME SCREEN MFG. Occupation (for Individual) OWNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 455.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 09 / 2016 <b>Transaction ID : SA17.309096</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. HAAWKINS, BETTY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1801 OLDS COURT City MARCO ISLAND State FL Zip Code 34145-5967 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 16 / 2016 <b>Transaction ID : SA17.299953</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. HABEEB, MARCUS, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 12 ROLLINGWOOD COURT City HAUPPAUGE State NY Zip Code 11788-4375 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 21 / 2016 <b>Transaction ID : SA17.303613</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		850.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HABERSTICK, MARILYN, , ,**

Mailing Address 560 E. S. TEMPLE #703

City  
SALT LAKE CITY

State  
UT

Zip Code  
84102-1168

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SINCLAIR OIL & GAS COMPANY

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA17.294149**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAGADORN, RICHARD, , ,**

Mailing Address 3005 HARBOR COVE DR.

City  
LAS VEGAS

State  
NV

Zip Code  
89128-7084

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.302755**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HAGAR, GREGORY, , ,**

Mailing Address 950 W MAIN ST

City  
INVERNESS

State  
FL

Zip Code  
34450-4626

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE HAGAR GROUP

Occupation (for Individual)  
INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.305113**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. HAIK, LAWRENCE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1539 ROYAL PALM DR. City SLIDELL State LA Zip Code 70458-6215 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE 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 05 / 23 / 2016 <b>Transaction ID : SA17.302475</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. HALFORD, ESTHER, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 12507 WOODLAKE LN City PINEHURST State TX Zip Code 77362-3948 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) HALFORD BUSBY Occupation (for Individual) BUSINESS OWNER 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 05 / 18 / 2016 <b>Transaction ID : SA17.296497</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. HALL, DUANE, R., ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P.O. BOX 264 City EDINA State MO Zip Code 63537-0264 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF Occupation (for Individual) LANDLORD/REALTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 23 / 2016 <b>Transaction ID : SA17.302967</b> Amount of Each Receipt this Period 15.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			515.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HALVERSON, ALAN, , ,**

Mailing Address 1826 STONEBROOK LN

City  
CLOVIS

State  
CA

Zip Code  
93611-5984

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05** / **09** / **2016**

**Transaction ID : SA17.293953**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HALVERSON, ALAN, , ,**

Mailing Address 1826 STONEBROOK LN

City  
CLOVIS

State  
CA

Zip Code  
93611-5984

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.300159**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HALVERSON, ALAN, , ,**

Mailing Address 1826 STONEBROOK LN

City  
CLOVIS

State  
CA

Zip Code  
93611-5984

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.303125**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

225.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. HALVERSON, ALAN, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 <b>Transaction ID : SA17.306830</b>	
Mailing Address 1826 STONEBROOK LN			Amount of Each Receipt this Period 50.00	
City CLOVIS	State CA	Zip Code 93611-5984	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) 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 ▼ 275.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. HAMILTON, EARL, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 <b>Transaction ID : SA17.293708</b>	
Mailing Address 1884 KIMS COVE ROAD			Amount of Each Receipt this Period 100.00	
City CANTON	State NC	Zip Code 28716-9130	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) 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 ▼ 625.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HAMILTON, EARL, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2016 <b>Transaction ID : SA17.299864</b>	
Mailing Address 1884 KIMS COVE ROAD			Amount of Each Receipt this Period 250.00	
City CANTON	State NC	Zip Code 28716-9130	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) 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 ▼ 625.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			400.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HAMILTON, EARL, , ,**

Mailing Address 1884 KIMS COVE ROAD

City  
CANTON

State  
NC

Zip Code  
28716-9130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.301865**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HAMILTON, JAMES, P., ,**

Mailing Address 143 STONE RIDGE ROAD

City  
LEESVILLE

State  
SC

Zip Code  
29070-7295

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.307050**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HAMRICK, CYNTHIA, , ,**

Mailing Address 2117 DUCKHUNTER PT. DR.

City  
FLORENCE

State  
SC

Zip Code  
29501-8345

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HOME SCHOOL

Occupation (for Individual)  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295656**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00



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<div style="border: 1px solid black; width: 30px; height: 30px;"></div>	11a	<div style="border: 1px solid black; width: 30px; height: 30px;"></div>	11b	<div style="border: 1px solid black; width: 30px; height: 30px;"></div>	11c	<div style="border: 1px solid black; width: 30px; height: 30px;"></div>	12		
<div style="border: 1px solid black; width: 30px; height: 30px;"></div>	13	<div style="border: 1px solid black; width: 30px; height: 30px;"></div>	14	<div style="border: 1px solid black; width: 30px; height: 30px;"></div>	15	<div style="border: 1px solid black; width: 30px; height: 30px;"></div>	16	<div style="border: 1px solid black; width: 30px; height: 30px; text-align: center;">X</div>	17

NAME OF COMMITTEE (In Full)  
GREAT AMERICA PAC

NON CONTRIBUTION ACCOUNT

NON CONTRIBUTION ACCOUNT

NON CONTRIBUTION ACCOUNT

[illegible]

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

 Use separate schedule(s)  
 for each category of the  
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<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HARLOW, DANNY, , ,**

Mailing Address 17303 NE 32ND AVE

 City  
 RIDGEFIELD

 State  
 WA

 Zip Code  
 98642-7972

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 NW TAX & WEALTH ADVISORY GROUP

 Occupation (for Individual)  
 PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2016

Transaction ID : SA17.295319

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HARNEY, KEVIN, , ,**

Mailing Address 94 LAKE AVE

 City  
 CENTER MORICHES

 State  
 NY

 Zip Code  
 11934-2527

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 STALCO CONSTRUCTION INC.

 Occupation (for Individual)  
 SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : SA17.306467

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HARRISON, BARBARA J., , ,**

Mailing Address 38221 VIA ROBERTA

 City  
 PALM SPRINGS

 State  
 CA

 Zip Code  
 92264-0230

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 RETIRED

 Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2016

Transaction ID : SA17.294028

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

**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  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. HAYMES, STEPHEN, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 14 / 2016 <b>Transaction ID : SA17.295914</b>
Mailing Address 5 PENN PLAZA			Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION  NON CONTRIBUTION ACCOUNT
City NEW YORK	State NY	Zip Code 10001-1810	
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) SELF		Occupation (for Individual) REAL ESTATE INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. HAYMES, STEPHEN, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 23 / 2016 <b>Transaction ID : SA17.301916</b>
Mailing Address 5 PENN PLAZA			Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION  NON CONTRIBUTION ACCOUNT
City NEW YORK	State NY	Zip Code 10001-1810	
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) SELF		Occupation (for Individual) REAL ESTATE INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HAYS, SHIRLEY, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2016 <b>Transaction ID : SA17.300165</b>
Mailing Address 56059 WINGED FOOT			Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION  NON CONTRIBUTION ACCOUNT
City LA QUINTA	State CA	Zip Code 92253-4675	
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2250.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. HEITZ, MARK, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 260 SW YORKSHIRE ROAD City TOPEKA State KS Zip Code 66606-2283 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 10 / 2016 <b>Transaction ID : SA17.293999</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. HELD, DON, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6081 SILVER KING BLVD UNIT 201 City CAPE CORAL State FL Zip Code 33914-8055 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2016 <b>Transaction ID : SA17.304609</b> Amount of Each Receipt this Period 150.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. HELD, DON, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 6081 SILVER KING BLVD UNIT 201 City CAPE CORAL State FL Zip Code 33914-8055 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2016 <b>Transaction ID : SA17.304610</b> Amount of Each Receipt this Period 150.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			550.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HELLERICH, LYNETTE, , ,**

Mailing Address **800 W STOCKWELL STREET**

City  
**LINCOLN**

State  
**NE**

Zip Code  
**68522-2143**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RE CONSULTANTS MIDWEST**

Occupation (for Individual)  
**REALTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295090**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HELQUIST, ED, , ,**

Mailing Address **7894 HUNTERS GROVE RD**

City  
**JACKSONVILLE**

State  
**FL**

Zip Code  
**32256-7214**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 09 / 2016**

**Transaction ID : SA17.299296**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HERETH, JACK, , ,**

Mailing Address **2269 E CHEROKEE DR.**

City  
**WOODSTOCK**

State  
**GA**

Zip Code  
**30188-1941**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**GIBSONBURG HEALTH, LLC**

Occupation (for Individual)  
**EXECUTIVE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.302329**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**

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

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HERFIELD, STEVEN, , ,**

Mailing Address 1140 HATTERAS LANE

City  
 HOLLYWOOD

State  
 FL

Zip Code  
 33019-5068

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 METLANG LLC

Occupation (for Individual)  
 OWNER MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305952**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HETLAND, DONNA, , ,**

Mailing Address 122 APRIL BREEZE ST.

City  
 MONTGOMERY

State  
 TX

Zip Code  
 77356-5882

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305109**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HICKMAN, LEE S, , ,**

Mailing Address 3275 COUNTY ROAD 47  
 F169

City  
 FLORENCE

State  
 AL

Zip Code  
 35630-8908

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.302243**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. HICKMAN, LEE S, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 26 / 2016</div> </div>	
Mailing Address 3275 COUNTY ROAD 47 F169			<b>Transaction ID : SA17.304587</b>	
City FLORENCE	State AL	Zip Code 35630-8908	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. HICKMAN, LEE S, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>	
Mailing Address 3275 COUNTY ROAD 47 F169			<b>Transaction ID : SA17.305093</b>	
City FLORENCE	State AL	Zip Code 35630-8908	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HOFFMAN, KEN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 25 / 2016</div> </div>	
Mailing Address 15455 SE RIVER FOREST DR.			<b>Transaction ID : SA17.305492</b>	
City PORTLAND	State OR	Zip Code 97267-3502	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SELF		Occupation (for Individual) REAL ESTATE	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HOLDER, JACK, , ,**

Mailing Address **47 BRALEY HEIGHTS**

City  
**MAPLETON**

State  
**ME**

Zip Code  
**04757-4542**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**MAINE FARMERS EXCHANGE**

Occupation (for Individual)  
**CERTIFIED PUBLIC ACCOUNTANT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.302322**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HOLMES, LEE, , ,**

Mailing Address **P.O. BOX AR**

City  
**HAGATNA**

State  
**GU**

Zip Code  
**96932-7564**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.302338**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HOLMES, LEE, , ,**

Mailing Address **P.O. BOX AR**

City  
**HAGATNA**

State  
**GU**

Zip Code  
**96932-7564**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305118**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**



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

Use separate schedule(s)  
for each category of the  
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(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HOLSTEIN, D BROOKS, , ,**

Mailing Address **286 BEAUVOIR ROAD**  
**SUITE 200**

City  
**BILOXI**

State  
**MS**

Zip Code  
**39531-4048**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**COMVEST PROPERTIES, LLC**

Occupation (for Individual)  
**COMMERCIAL REAL ESTATE DEVELOPER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.307065**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HOLUB, NOEL, , ,**

Mailing Address **5805 INDIANWOOD LANE**

City

**FORT WORTH**

State

**TX**

Zip Code

**76132-4490**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305117**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HOPKINS, CYNTHIA, , ,**

Mailing Address **1037 HASTINGS CIRCLE**

City

**BIRMINGHAM**

State

**AL**

Zip Code

**35242-2466**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**ATTORNEY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**275.00**

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA17.293740**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1350.00**

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

Use separate schedule(s)  
for each category of the  
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<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HOPPER, BILLY B., , ,**

Mailing Address **P.O. BOX 353 141 W. HARRIS AVE.**

City  
**MENTONE**

State  
**TX**

Zip Code  
**79754-0353**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.307060**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HOYT, GAYLORD, , ,**

Mailing Address **5830 OSO PARKWAY**

City  
**CORPUS CHRISTI**

State  
**TX**

Zip Code  
**78414-6046**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.302325**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HUBBARD, STANLEY, , ,**

Mailing Address **3415 UNIVERSITY AVE**

City  
**SAINT PAUL**

State  
**MN**

Zip Code  
**55114-1019**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**25000.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.293509**

Amount of Each Receipt this Period

**25000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**25750.00**

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

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

FOR LINE NUMBER: PAGE 203 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HUBER, JOSEPH, , ,**

Mailing Address 3645 SR. 982

City  
**LATROBE**

State  
**PA**

Zip Code  
**15650-3910**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**CCA**

Occupation (for Individual)  
**ATTORNEY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 26 / 2016**

**Transaction ID : SA17.305496**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HULBERT, ROBERT, , ,**

Mailing Address 8280 FOLSOM BLVD A

City  
**SACRAMENTO**

State  
**CA**

Zip Code  
**95826-5844**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**POWER INN CHIROPRACTIC**

Occupation (for Individual)  
**CHIROPRACTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**290.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA17.305938**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HUNT, PATRICIA, , ,**

Mailing Address 216 HARNED RD

City  
**COMMACK**

State  
**NY**

Zip Code  
**11725-4204**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF EMPLOYED**

Occupation (for Individual)  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA17.293694**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**

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

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

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. HURST, BOBBY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 17 / 2016</div> </div>	
Mailing Address <b>2010 WHISPER LANE</b>			<b>Transaction ID : SA17.302618</b>	
City <b>FAYETTEVILLE</b>	State <b>NC</b>	Zip Code <b>28303-7002</b>	Amount of Each Receipt this Period <div> <div></div> <div>50.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) <b>HURST ANNAHO SUPPLY CO., INC.</b>		Occupation (for Individual) <b>VICE PRESIDENT</b>	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>325.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. HURST, BOBBY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 24 / 2016</div> </div>	
Mailing Address <b>2010 WHISPER LANE</b>			<b>Transaction ID : SA17.304471</b>	
City <b>FAYETTEVILLE</b>	State <b>NC</b>	Zip Code <b>28303-7002</b>	Amount of Each Receipt this Period <div> <div></div> <div>50.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) <b>HURST ANNAHO SUPPLY CO., INC.</b>		Occupation (for Individual) <b>VICE PRESIDENT</b>	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>325.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. HYER, FRANK, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>	
Mailing Address <b>BOX 2202, DUXBURY, MA</b>			<b>Transaction ID : SA17.305119</b>	
City <b>DUXBURY</b>	State <b>MA</b>	Zip Code <b>02331-2202</b>	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) <b>HYER INDUSTRIES, INC</b>		Occupation (for Individual) <b>ENGINEER</b>	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div></div> <div>250.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

350.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

<b>A. INTRIERI, VINCENT, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 327 EAST 48TH STREET APT. 39A City NEW YORK State NY Zip Code 10017-1755 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) ICAHN PARTNERS LLC Occupation (for Individual) INVESTMENT MGR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2016 <b>Transaction ID : SA17.299840</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. INTRIERI, VINCENT, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 327 EAST 48TH STREET APT. 39A City NEW YORK State NY Zip Code 10017-1755 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) ICAHN PARTNERS LLC Occupation (for Individual) INVESTMENT MGR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2016 <b>Transaction ID : SA17.299863</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. IRWIN, JANE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 307 MONTANA LNDG City POLSON State MT Zip Code 59860-8954 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 19 / 2016 <b>Transaction ID : SA17.303522</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			450.00
<b>TOTAL</b> 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 206 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. IRWIN, JANE, , ,**

Mailing Address 307 MONTANA LNDG

City  
POLSON

State  
MT

Zip Code  
59860-8954

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.306924**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. IVERS, DONALD, , ,**

Mailing Address 1511 PAUL SPRING PARKWAY

City

ALEXANDRIA

State

VA

Zip Code

22308-1143

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **21** / **2016**

**Transaction ID : SA17.303833**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. J.SCHILDWACHTER, STEPHEN, , ,**

Mailing Address 1070 CRAWFORD MILL RD.

City

WATKINSVILLE

State

GA

Zip Code

30677-2966

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NEW YORK LIFE

Occupation (for Individual)  
FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.307045**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

550.00

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

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

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. JACKSON, ROBERT, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 / 31 / 2016</b>	
Mailing Address <b>265 SNIDER DRIVE</b>			<b>Transaction ID : SA17.304616</b>	
City <b>WALLA WALLA</b>	State <b>WA</b>	Zip Code <b>99362-8079</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>250.00</b>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. JACKSON, TIM, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 / 12 / 2016</b>	
Mailing Address <b>650 MAPLE CREEK DRIVE</b>			<b>Transaction ID : SA17.294826</b>	
City <b>FAIRVIEW</b>	State <b>TX</b>	Zip Code <b>75069-0138</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>SELF-EMPLOYED</b>		Occupation (for Individual) <b>HOME BUILDER</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>500.00</b>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. JACOBSEN, CHRISTIAN, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 / 25 / 2016</b>	
Mailing Address <b>43 LANDSEND LANE</b>			<b>Transaction ID : SA17.307047</b>	
City <b>SOUTHAMPTON</b>	State <b>NY</b>	Zip Code <b>11968-3507</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	<b>NON CONTRIBUTION ACCOUNT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <b>300.00</b>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1000.00**



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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBSEN, CHRISTIAN, , ,**

Mailing Address 43 LANDSEND LANE

City  
**SOUTHAMPTON**

State  
**NY**

Zip Code  
**11968-3507**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.309054**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JAFFE, WILLIAM, , ,**

Mailing Address 5688 TOWER HILL CIRCLE

City  
**KINGSTOWNE**

State  
**VA**

Zip Code  
**22315-5590**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**TAPE**

Occupation (for Individual)  
**GENERAL MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295064**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JAMES, TOM, , ,**

Mailing Address 1630 SEAWAY DRIVE  
106

City  
**FORT PIERCE**

State  
**FL**

Zip Code  
**34949-3108**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.303842**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**800.00**



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

Use separate schedule(s)  
for each category of the  
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(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. JENSEN, M LEON, , ,

Mailing Address 3951 SOVEREIGN DR.

City  
 BUFORD

State  
 GA

Zip Code  
 30519-8452

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 SMALL BUSINESS 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  
 05 / 23 / 2016

Transaction ID : SA17.302476

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSTON, HARRISON, , ,

Mailing Address 1588 E. DESERT GARDEN DRIVE

City  
 TUCSON

State  
 AZ

Zip Code  
 85718-7833

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 08 / 2016

Transaction ID : SA17.293864

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSTON, HARRISON, , ,

Mailing Address 1588 E. DESERT GARDEN DRIVE

City  
 TUCSON

State  
 AZ

Zip Code  
 85718-7833

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2016

Transaction ID : SA17.304607

Amount of Each Receipt this Period

102.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

702.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. JOHNSON, TODD, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2016 <b>Transaction ID : SA17.295802</b>	
Mailing Address 721 TIDGEWOOD ROAD			Amount of Each Receipt this Period 500.00	
City DULUTH	State MN	Zip Code 55804-1732	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) CAPSTAN CORPORATION		Occupation (for Individual) CEO	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. JONES, RONALD, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2016 <b>Transaction ID : SA17.302248</b>	
Mailing Address 11161 PEPPERMILL LANE			Amount of Each Receipt this Period 100.00	
City FISHERS	State IN	Zip Code 46037-9082	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. JONES, RONALD, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2016 <b>Transaction ID : SA17.303499</b>	
Mailing Address 11161 PEPPERMILL LANE			Amount of Each Receipt this Period 100.00	
City FISHERS	State IN	Zip Code 46037-9082	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 225.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			700.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. JONES, RONALD, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 11161 PEPPERMILL LANE City FISHERS State IN Zip Code 46037-9082 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.304081</b> Amount of Each Receipt this Period 25.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. JOVE, RICHARD, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 347 N. NEW RIVER DR. EAST APT 609 City FORT LAUDERDALE State FL Zip Code 33301-3136 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) NOVA SOUTHEASTERN UNIVERSITY Occupation (for Individual) CANCER RESEARCHER AND PROFE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2016 <b>Transaction ID : SA17.296334</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. KANE, EDWARD, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 45 REESE RD City MILLVILLE State NJ Zip Code 08332-6227 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) BODYBIO Occupation (for Individual) CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2016 <b>Transaction ID : SA17.303845</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		2025.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. KANE, EDWARD, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 45 REESE RD City MILLVILLE State NJ Zip Code 08332-6227 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) BODYBIO Occupation (for Individual) CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016 <b>Transaction ID : SA17.307067</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. KASZTON, WILLIAM, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 41 VAN GOGH WAY City TRABUCO CANYON State CA Zip Code 92679-8503 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 17 / 2016 <b>Transaction ID : SA17.302490</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. KATHERMAN, ROBERT, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P.O. BOX 252 City MIDLOTHIAN State VA Zip Code 23113-0252 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) KATHERMAN & CO. INC Occupation (for Individual) COMMERCIAL REAL ESTATE DEVEL 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 05 / 12 / 2016 <b>Transaction ID : SA17.295239</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1500.00
<b>TOTAL</b> 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 213 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KAUFFMAN, VERNON, , ,**

Mailing Address 1007 LYNN CIRCLE

City  
 FRIENDSWOOD

State  
 TX

Zip Code  
 77546-4842

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 F & F HUNTERS' SERVICES

Occupation (for Individual)  
 PRESIDENT OF OWN COMPANY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.303629**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KEEN, JACK, , ,**

Mailing Address P.O. BOX 885

City  
 SILVER CITY

State  
 NM

Zip Code  
 88062-0885

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 WNM COMMUNICATIONS

Occupation (for Individual)  
 TELEPHONE COMPANY CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.296670**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KEETON, DENNIS, , ,**

Mailing Address 3602 FM 2554

City  
 IVANHOE

State  
 TX

Zip Code  
 75447-3230

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 FARMER RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295727**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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

FOR LINE NUMBER: PAGE 214 OF 389

(check only one)

<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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEHAYAS, NICHOLAS, , ,**

Mailing Address P.O. BOX 98

City  
**SOMERSET**

State  
**NJ**

Zip Code  
**08875-0098**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**CITY PLANNER/DEVELOPER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295453**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEILLER, INGELA, , ,**

Mailing Address 73560 AMIR DR.

City  
**PALM DESERT**

State  
**CA**

Zip Code  
**92260-5803**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.303626**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEKEISEN, FRANK, , ,**

Mailing Address 12028 WESHILL COURT

City  
**MARYLAND HEIGHTS**

State  
**MO**

Zip Code  
**63043-4131**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**275.00**

Date of Receipt

**05 / 04 / 2016**

**Transaction ID : SA17.293596**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1600.00**

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

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

FOR LINE NUMBER: PAGE 215 OF 389  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KEKEISEN, FRANK, , ,**

Mailing Address 12028 WESHILL COURT

City  
 MARYLAND HEIGHTS

State  
 MO

Zip Code  
 63043-4131

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**05** / **26** / **2016**

**Transaction ID : SA17.305389**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KELLER, JEROME, , ,**

Mailing Address 626 THOMAS JEFFERSON RD

City  
 WAYNE

State  
 PA

Zip Code  
 19087-1028

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

**05** / **06** / **2016**

**Transaction ID : SA17.293706**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KELLER, JEROME, , ,**

Mailing Address 626 THOMAS JEFFERSON RD

City  
 WAYNE

State  
 PA

Zip Code  
 19087-1028

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.299861**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

650.00

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

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

FOR LINE NUMBER: PAGE 216 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KILGORE, CHERYL, , ,**

Mailing Address 12904 BAY PLANTATION DRIVE

City  
JACKSONVILLE

State  
FL

Zip Code  
32223-0784

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.302435**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KILGORE, CHERYL, , ,**

Mailing Address 12904 BAY PLANTATION DRIVE

City  
JACKSONVILLE

State  
FL

Zip Code  
32223-0784

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.304620**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KILGORE, MANLEY, , ,**

Mailing Address 12904 BAY PLANTATION DRIVE

City  
JACKSONVILLE

State  
FL

Zip Code  
32223-0784

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295803**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1250.00



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

Use separate schedule(s)  
for each category of the  
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(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KIMMELMAN, DOUGLAS, , ,**

Mailing Address 130 OVERLEIGH RD

City  
BERNARDSVILLE

State  
NJ

Zip Code  
07924-1519

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ENERGY CAPITAL PARTNERS

Occupation (for Individual)  
INVESTMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.308971**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KIRK, ROGER, , ,**

Mailing Address 23020 N. 94TH STREET

City  
SCOTTSDALE

State  
AZ

Zip Code  
85255-4305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
AUTOMATED DATA SYSTEMS

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.305508**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KITE, RANDY, , ,**

Mailing Address 10662 WOLFF WAY

City  
WESTMINSTER

State  
CO

Zip Code  
80031-1977

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
IDG & ASSOC., PC

Occupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.295051**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

51250.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 218 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KLUHSMEIER, GEORGE, , ,**

Mailing Address 194 CANDLEWOOD ROAD

City  
 BAY SHORE

State  
 NY

Zip Code  
 11706-2219

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF EMPLOYED

Occupation (for Individual)  
 SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295061**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KNICKERBOCKER, ALZADA, , ,**

Mailing Address 3103 WOODS CIRCLE

City  
 DAVIS

State  
 CA

Zip Code  
 95616-2685

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.296389**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KNICKERBOCKER, ALZADA, , ,**

Mailing Address 3103 WOODS CIRCLE

City  
 DAVIS

State  
 CA

Zip Code  
 95616-2685

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 RETAIL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.302459**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

Use separate schedule(s)  
for each category of the  
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(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KNOTT, TERRY, , ,**

Mailing Address **4014 E LAVENDER LN**

City  
**PHOENIX**

State  
**AZ**

Zip Code  
**85044-4640**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.305482**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KOCH, BRIDGET, , ,**

Mailing Address **974 SOUTH OCEAN BLVD**

City

**PALM BEACH**

State

**FL**

Zip Code

**33480-4909**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.302777**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KORSCHUN, SANFORD SANDY, , ,**

Mailing Address **P.O. DRAWER 10669**

City

**GOLDSBORO**

State

**NC**

Zip Code

**27532-0669**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**2500.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.303635**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**3000.00**

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 220 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOSCHTIAL, SUE, , ,**

Mailing Address 3319 OWENS AVE

City  
 CODY

State  
 WY

Zip Code  
 82414-8519

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 THE GRAND CORP

Occupation (for Individual)  
 SEMI RETRIED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.296011**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KOSLOSKY, MICHAEL, , ,**

Mailing Address P.O. BOX 181

City

NEBRASKA CITY

State

NE

Zip Code

68410-0181

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 MAGNOLIA METAL CORP.

Occupation (for Individual)  
 PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294174**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KOSSOUJI, JOY, , ,**

Mailing Address 120 SOUTH BROADWAY  
 P.O. BOX 647

City

LEBANON

State

OH

Zip Code

45036-1729

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 GOLDEN TURTLE CHOCOLATE FACTORY

Occupation (for Individual)  
 SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294214**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KRAMM, GERHARD, , ,**

Mailing Address 4370 DRIFTWOOD COURT

City  
 FAIRBANKS

State  
 AK

Zip Code  
 99709-3483

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **27** / **2016**

**Transaction ID : SA17.305111**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KRESSLER, RANDALL, , ,**

Mailing Address 821 DUNHAM CLOSE

City  
 FORT WORTH

State  
 TX

Zip Code  
 76114-4170

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.303607**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KRIEGER, FRAN, , ,**

Mailing Address 10330 SAINT ANDREWS DR

City  
 OAKDALE

State  
 CA

Zip Code  
 95361-9587

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 FRAN KRIEGER INSURANCE AGENCY -

Occupation (for Individual)  
 INSURANCE AGENCY OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **23** / **2016**

**Transaction ID : SA17.301910**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. KROHN, MILTON, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 11 / 2016</div> </div>	
Mailing Address 15625 OCEAN WALK CIR 213			<b>Transaction ID : SA17.294628</b>	
City FORT MYERS	State FL	Zip Code 33908-1357	Amount of Each Receipt this Period <div> <div>75.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. KROHN, MILTON, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 24 / 2016</div> </div>	
Mailing Address 15625 OCEAN WALK CIR 213			<b>Transaction ID : SA17.304469</b>	
City FORT MYERS	State FL	Zip Code 33908-1357	Amount of Each Receipt this Period <div> <div>50.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. KRUG, PETER J, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 17 / 2016</div> </div>	
Mailing Address 3817 MCCOY DR. SUITE 109			<b>Transaction ID : SA17.302324</b>	
City AURORA	State IL	Zip Code 60504-4234	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) CIFII INC		Occupation (for Individual) GENERAL MANAGER	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KRUSELL, WILBUR, , ,**

Mailing Address 1060 LAKESHORE BLVD

City  
 INCLINE VLG

State  
 NV

Zip Code  
 89451-9327

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **07** / **2016**

**Transaction ID : SA17.293779**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LABARE, RICHARD, , ,**

Mailing Address 24 PRINCETON DR.

City  
 RANCHO MIRAGE

State  
 CA

Zip Code  
 92270-3159

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 UNION CAPITAL

Occupation (for Individual)  
 CFP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **27** / **2016**

**Transaction ID : SA17.305948**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LAGUEUX, DANIEL, , ,**

Mailing Address LOON CV

City  
 PALERMO

State  
 ME

Zip Code  
 04354-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **29** / **2016**

**Transaction ID : SA17.305943**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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

FOR LINE NUMBER: PAGE 224 OF 389  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. LAMAN, G D, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016 <b>Transaction ID : SA17.305133</b>	
Mailing Address 1150 E PLANT ST SUITE F			Amount of Each Receipt this Period 500.00	
City WINTER GARDEN	State FL	Zip Code 34787-2922	<input type="checkbox"/> Memo Item CONTRIBUTION  NON CONTRIBUTION ACCOUNT	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) GIL INC		Occupation (for Individual) REAL ESTATE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. LAMB, GARY, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2016 <b>Transaction ID : SA17.300363</b>	
Mailing Address P O BOX 3383			Amount of Each Receipt this Period 500.00	
City MIDLAND	State TX	Zip Code 79702-3383	<input type="checkbox"/> Memo Item CONTRIBUTION  NON CONTRIBUTION ACCOUNT	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. LANDRUM, JOHN, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2016 <b>Transaction ID : SA17.302431</b>	
Mailing Address 2405 BRAZORIA STREET			Amount of Each Receipt this Period 250.00	
City HOUSTON	State TX	Zip Code 77019-6021	<input type="checkbox"/> Memo Item CONTRIBUTION  NON CONTRIBUTION ACCOUNT	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) AMG CAPITAL		Occupation (for Individual) REAL ESTATE INVESTMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1250.00



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LANTING, JAMES, , ,**

Mailing Address 5999 HILLSBOROUGH CT.

City  
GRANDVILLE

State  
MI

Zip Code  
49418-3236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.303622**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LATIMER, CHARLES F, , ,**

Mailing Address 38W668 EVANSWOOD LANE

City  
ST. CHARLES

State  
IL

Zip Code  
60175-6043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.295148**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LATIMER, CHARLES F, , ,**

Mailing Address 38W668 EVANSWOOD LANE

City  
ST. CHARLES

State  
IL

Zip Code  
60175-6043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.296616**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LATORA, SAL, , ,**

Mailing Address **PO BOX 14634**

City  
**SANTA ROSA**

State  
**CA**

Zip Code  
**95402-6634**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.304634**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LAZARUS, THELMA, , ,**

Mailing Address **216 W. 4TH STREET**

City  
**KEENE**

State  
**TX**

Zip Code  
**76059-1704**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.306961**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LEAHY, ROBERT, , ,**

Mailing Address **622 JASMINE LA**

City  
**SUNSET BEACH**

State  
**NC**

Zip Code  
**28468-5317**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.296154**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1600.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LEAMON, DOROTHY B, , ,**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**DOROTHY'S TAX SERVICE INC**

Occupation (for Individual)  
**TAX PROFESSIONAL**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.296015**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LEE, CHRISTOPHER, , ,**

Mailing Address **100 PIER 4 BLVD  
UNIT 1013**

City

**BOSTON**

State

**MA**

Zip Code

**02210-1952**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**SELF**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.296680**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LEE, GOOM SOOK, , ,**

Mailing Address **1900 SW RIVER DR. N112**

City

**PORTLAND**

State

**OR**

Zip Code

**97201-8044**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.294990**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1250.00

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

Use separate schedule(s)  
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(check only one)

<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

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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEE, RICHARD, , ,

Mailing Address 514 AMERICAS WAY 6777

City  
 BOX ELDER

State  
 SD

Zip Code  
 57719-7600

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

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  
 05 / 16 / 2016

Transaction ID : SA17.299952

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LENTZ III M.D., CARL W, , ,

Mailing Address 1265 W GRANADA BLVD  
 SUITE 3

City  
 ORMOND BEACH

State  
 FL

Zip Code  
 32174-8256

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 LENTZ PLASTIC SURGERY

Occupation (for Individual)  
 PLASTIC SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2016

Transaction ID : SA17.293746

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LENTZ III M.D., CARL W, , ,

Mailing Address 1265 W GRANADA BLVD  
 SUITE 3

City  
 ORMOND BEACH

State  
 FL

Zip Code  
 32174-8256

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 LENTZ PLASTIC SURGERY

Occupation (for Individual)  
 PLASTIC SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2016

Transaction ID : SA17.299866

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

850.00

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

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LEONARD, STEPHEN, , ,**

Mailing Address 3704 E ALTA RIDGE CT

City  
BOISE

State  
ID

Zip Code  
83716-7122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **21** / **2016**

**Transaction ID : SA17.303844**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LEONARD, THOMAS, , ,**

Mailing Address P.O. BOX 1509

City  
DANVILLE

State  
CA

Zip Code  
94526-6509

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **10** / **2016**

**Transaction ID : SA17.300358**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LESLIE, JOSEPHINE, , ,**

Mailing Address 6942 EAST BRONCO DRIVE

City  
PARADISE VALLEY

State  
AZ

Zip Code  
85253-3123

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.295367**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

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

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

FOR LINE NUMBER: PAGE 230 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

<b>A. LESTE, JIM, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3437 VIA LOMA VISTA City ESCONDIDO State CA Zip Code 92029-7724 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt <input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2016"/> <b>Transaction ID : SA17.300454</b> Amount of Each Receipt this Period <input type="text" value="500.00"/> <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. LEVINE, ALICIA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3507 BAYSHORE BLVE UNIT 603 City TAMPA State FL Zip Code 33629-8917 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt <input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2016"/> <b>Transaction ID : SA17.293605</b> Amount of Each Receipt this Period <input type="text" value="50.00"/> <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. LEVINE, ALICIA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3507 BAYSHORE BLVE UNIT 603 City TAMPA State FL Zip Code 33629-8917 FEC ID number of contributing federal political committee. <input type="text" value="C"/> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt <input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2016"/> <b>Transaction ID : SA17.293738</b> Amount of Each Receipt this Period <input type="text" value="100.00"/> <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<input type="text" value="650.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶			<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 231 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

<b>A. LEVINE, ALICIA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3507 BAYSHORE BLVE UNIT 603 City TAMPA State FL Zip Code 33629-8917 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 <b>Transaction ID : SA17.293739</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. LEVINE, JUDY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address PO817 City RSF State CA Zip Code 92067- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) SELF Occupation (for Individual) PROPERTY MANAGER 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 05 / 19 / 2016 <b>Transaction ID : SA17.296901</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. LEVY, JOSEPH, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 21013 NE 38TH AVE City AVENTURA State FL Zip Code 33180-4020 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 11 / 2016 <b>Transaction ID : SA17.294098</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			850.00
<b>TOTAL</b> 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 232 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LEWIS, ROBERT, , ,**

Mailing Address 12 BRANDYWOOD DR.

City  
 CLEVELAND

State  
 OH

Zip Code  
 44124-5501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 WELDED TUBES INC

Occupation (for Individual)  
 OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.300361**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LILLEY, CHARLES, , ,**

Mailing Address 2130 KINNEY LN

City  
 RENO

State  
 NV

Zip Code  
 89511-9564

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 PACIFIC SPRING LLC

Occupation (for Individual)  
 PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **21** / **2016**

**Transaction ID : SA17.302331**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LINDER, SPENCER, , ,**

Mailing Address 2951 WESTMINSTER CIR. NW

City  
 ATLANTA

State  
 GA

Zip Code  
 30327-1639

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.307051**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00



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

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

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(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LINDSTROM, D F, , ,**

Mailing Address **269 RAINBOW FALLS ROAD**

City  
**FRANKLIN**

State  
**NC**

Zip Code  
**28734-0027**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.304592**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LITTY JR., ERNEST, , ,**

Mailing Address **200 NEPTUNE DRIVE**

City  
**STEVENSVILLE**

State  
**MD**

Zip Code  
**21666-3063**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**LAWYER/BUSINESSMAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.302332**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LOMBARDO, NANCY W., , ,**

Mailing Address **141 MOUNTAIN ROAD**

City  
**GLASTONBURY**

State  
**CT**

Zip Code  
**06033-1506**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 29 / 2016**

**Transaction ID : SA17.305950**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**850.00**

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

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

FOR LINE NUMBER: PAGE 234 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LUDWIG, CAROLYN K, , ,**

Mailing Address 5104 AUBURNDALE AVE.

City  
COLLEYVILLE

State  
TX

Zip Code  
76034-5199

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
PUBLISHING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA17.294434**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LUISI, FRANK, , ,**

Mailing Address 335 BEAVER RUN ROAD

City  
APOLLO

State  
PA

Zip Code  
15613-8846

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **29** / **2016**

**Transaction ID : SA17.306055**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUNDQUIST, DAVID, , ,**

Mailing Address 6277 NORTH OCEAN BLVD

City  
OCEAN RIDGE

State  
FL

Zip Code  
33435-5211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305131**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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

FOR LINE NUMBER: PAGE 235 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. LURIE, RANAN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 27 / 2016</div> </div>	
Mailing Address 15 CENTRAL PARK WEST 36 - D			<b>Transaction ID : SA17.305513</b>	
City NEW YORK	State NY	Zip Code 10023-7708	Amount of Each Receipt this Period <div> <div></div> <div>5400.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) INTL. SYNDICATED POLITICAL ANAL	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>5400.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. LUSE, ERIC, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 24 / 2016</div> </div>	
Mailing Address 5316 OAKLAND ROAD			<b>Transaction ID : SA17.307044</b>	
City CHEVY CHASE	State MD	Zip Code 20815-6639	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) LUSE GORMAN PC		Occupation (for Individual) ATTORNEY	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>250.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. LUSK, MICHAEL, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 03 / 2016</div> </div>	
Mailing Address 1375 SPYGLASS LN.			<b>Transaction ID : SA17.293566</b>	
City NAPLES	State FL	Zip Code 34102-7740	Amount of Each Receipt this Period <div> <div></div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) NEUROSCIENCE & SPINE ASSOC		Occupation (for Individual) M.D.	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div></div> <div>350.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5750.00

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

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

FOR LINE NUMBER: PAGE 236 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LUSK, MICHAEL, , ,**

Mailing Address 1375 SPYGLASS LN.

City  
**NAPLES**

State  
**FL**

Zip Code  
**34102-7740**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**NEUROSCIENCE & SPINE ASSOC**

Occupation (for Individual)  
**M.D.**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.299937**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LYONS, DON S, , ,**

Mailing Address 9801 BUTTERCUP CIR N

City

**PALM BEACH GARDENS**

State

**FL**

Zip Code

**33410-5667**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.296774**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MACLELLAN, LISA, , ,**

Mailing Address 1102 EAST BROW ROAD

City

**LOOKOUT MOUNTAIN**

State

**TN**

Zip Code

**37350-1016**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.301898**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**450.00**

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

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

FOR LINE NUMBER: PAGE 237 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MACLELLAN, LISA, , ,**

Mailing Address 1102 EAST BROW ROAD

 City  
 LOOKOUT MOUNTAIN

 State  
 TN

 Zip Code  
 37350-1016

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 RETIRED

 Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	1	6		

Transaction ID : SA17.304438

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MAHER, DAVID, , ,**

Mailing Address 1819 KINGS CLIFF RD

 City  
 SAINT LOUIS

 State  
 MO

 Zip Code  
 63122-2227

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 MAHER & COMPANY PC

 Occupation (for Individual)  
 CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

Transaction ID : SA17.303610

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MANN, GEORGE, , ,**

Mailing Address 9900 GLOUCESTER AVENUE

 City  
 IOLA

 State  
 TX

 Zip Code  
 77861-4582

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 SELF

 Occupation (for Individual)  
 SELF EMPLOYED CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	6		

Transaction ID : SA17.306329

Amount of Each Receipt this Period

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MANNING, JAMES O., , ,**

Mailing Address **3 LITTLE CREEK**

City  
**FLOWOOD**

State  
**MS**

Zip Code  
**39232-9346**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.302882**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MARA, TOM, , ,**

Mailing Address **9 BRIDGEWATERS DRIVE**  
**3**

City  
**OCEANPORT**

State  
**NJ**

Zip Code  
**07757-1156**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.305502**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MARCOM, BILLY R, , ,**

Mailing Address **3817 ASHBURY LANE**

City  
**BEDFORD**

State  
**TX**

Zip Code  
**76021-2406**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.301884**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1600.00**

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 239 OF 389

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. MARCUS, JANE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 8065 INNISBROOK COURT City COLUMBUS State GA Zip Code 31909-2088 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.304576</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. MARCUS, JANE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 8065 INNISBROOK COURT City COLUMBUS State GA Zip Code 31909-2088 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.306937</b> Amount of Each Receipt this Period 75.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. MARRON, ANN, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 321 E PLATTE City FORT MORGAN State CO Zip Code 80701-3139 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) SELF Occupation (for Individual) SMALL BUSINESS OWNER 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 05 / 18 / 2016 <b>Transaction ID : SA17.303608</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			425.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MARSHALL, JOHN, , ,**

Mailing Address **646 WOODLEIGH DR.**

City  
**BATON ROUGE**

State  
**LA**

Zip Code  
**70810-5328**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**BATON ROUGE CLINIC**

Occupation (for Individual)  
**PHYSICIAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.296925**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MASIELLO, JAMES, , ,**

Mailing Address **234 LAFAYETTE ROAD**

City

**JIMM@SIAA.NET**

State

**NH**

Zip Code

**03842-4105**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ALLIANCE HOLDINGS, INC**

Occupation (for Individual)  
**CEO - CHAIRMAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**2500.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.307082**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MASSEY, CAROL, , ,**

Mailing Address **6318 S. GLENRIDGE DR.**

City

**SPRINGFIELD**

State

**MO**

Zip Code

**65804-7907**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.306480**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**3000.00**



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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MAYO, GLORIA, , ,**

Mailing Address **492 THORN CREEK WAY**

City  
**DALLAS**

State  
**GA**

Zip Code  
**30157-9627**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 27 / 2016**

**Transaction ID : SA17.304633**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MCBROOM, JACKSON, , ,**

Mailing Address **1661 RIVER RIDGE**

City

**WILLIAMSBURG**

State

**VA**

Zip Code

**23185-7546**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 15 / 2016**

**Transaction ID : SA17.300081**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MCCANN, PETER, , ,**

Mailing Address **P.O. BOX 416**

City

**GROVEPORT**

State

**OH**

Zip Code

**43125-0416**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**R. E. DEVELOPER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.307083**

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**6250.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MCCANN, RENE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2016 <b>Transaction ID : SA17.297157</b>	
Mailing Address 6337 SUGAR PINE DRIVE			Amount of Each Receipt this Period 250.00	
City WILMINGTON	State NC	Zip Code 28412-2745	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) THE WESTWIND GROUP, INC.		Occupation (for Individual) OWNER, CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. MCCLURE, HOYT, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2016 <b>Transaction ID : SA17.308713</b>	
Mailing Address 58 ADRIANNA PATH DR.			Amount of Each Receipt this Period 500.00	
City MISSOURI CITY	State TX	Zip Code 77459-1136	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. MCCOMBS, JOSEPH, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2016 <b>Transaction ID : SA17.302540</b>	
Mailing Address 820 N MAIN STREET			Amount of Each Receipt this Period 250.00	
City KELLER	State TX	Zip Code 76248-3801	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) SAMANTHA SPRINGS		Occupation (for Individual) SELF		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MCCOMB, THOMAS, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div> <b>Transaction ID : SA17.299934</b>	
Mailing Address 1325 S PORTOFINO DR. UNIT 109				
City SARASOTA	State FL	Zip Code 34242-3133		
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <div>100.00</div>	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>350.00</div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. MCCOMB, THOMAS, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 09 / 2016</div> </div> <b>Transaction ID : SA17.309105</b>	
Mailing Address 1325 S PORTOFINO DR. UNIT 109				
City SARASOTA	State FL	Zip Code 34242-3133		
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <div>250.00</div>	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>350.00</div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. MCCORMICK, DR. WILLIAM, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 25 / 2016</div> </div> <b>Transaction ID : SA17.305505</b>	
Mailing Address 2863 PALMER DR.				
City SIERRA VISTA	State AZ	Zip Code 85650-5266		
FEC ID number of contributing federal political committee. <div>C</div>			Amount of Each Receipt this Period <div>500.00</div>	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div>500.00</div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MCCURDY, DONALD, , ,**

Mailing Address **BOX 363 127 STEELE RD.**

City  
**NEW HARTFORD**

State  
**CT**

Zip Code  
**06057-2616**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ESC**

Occupation (for Individual)  
**BUSINESS OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 09 / 2016**

**Transaction ID : SA17.299302**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MCDONOUGH, FRANK J, , ,**

Mailing Address **420 WINDEMERE DRIVE**

City  
**STAUNTON**

State  
**VA**

Zip Code  
**24401-2159**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 14 / 2016**

**Transaction ID : SA17.295856**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MCDONOUGH, FRANK J, , ,**

Mailing Address **420 WINDEMERE DRIVE**

City  
**STAUNTON**

State  
**VA**

Zip Code  
**24401-2159**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 14 / 2016**

**Transaction ID : SA17.295857**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1000.00**

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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. MCKAY, VERLON, , ,</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 25 / 2016</div> </div> </p>		
<p>Mailing Address 1600 DOVE STREET 250</p>			<p><b>Transaction ID : SA17.305503</b></p>		
<p>City NEWPORT BEACH</p>	<p>State CA</p>	<p>Zip Code 92660-2432</p>	<p>Amount of Each Receipt this Period  <div> <div>500.00</div> </div> </p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>		
<p>Name of Employer (for Individual) MCKAY &amp; CARNAHAN, INC.</p>		<p>Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT</p>	<p>NON CONTRIBUTION ACCOUNT</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼  <div> <div>500.00</div> </div> </p>			
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. MCKENZIE, JOE A, , ,</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 15 / 2016</div> </div> </p>		
<p>Mailing Address 701 SHERRI ST.</p>			<p><b>Transaction ID : SA17.296300</b></p>		
<p>City RIDGECREST</p>	<p>State CA</p>	<p>Zip Code 93555-3443</p>	<p>Amount of Each Receipt this Period  <div> <div>400.00</div> </div> </p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>		
<p>Name of Employer (for Individual) RETIRED</p>		<p>Occupation (for Individual) RETIRED</p>	<p>NON CONTRIBUTION ACCOUNT</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼  <div> <div>400.00</div> </div> </p>			
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. MCLEOD, JENNESS, , ,</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div> </p>		
<p>Mailing Address 32MONTICELLO DR.</p>			<p><b>Transaction ID : SA17.295268</b></p>		
<p>City ANDOVER</p>	<p>State NH</p>	<p>Zip Code 03216-3713</p>	<p>Amount of Each Receipt this Period  <div> <div>1000.00</div> </div> </p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>		
<p>Name of Employer (for Individual) RETIRED</p>		<p>Occupation (for Individual) RETIRED</p>	<p>NON CONTRIBUTION ACCOUNT</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) </p>		<p>Aggregate Year-to-Date ▼  <div> <div>1000.00</div> </div> </p>			
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....▶</p>			<div> <div>1900.00</div> </div>		
<p><b>TOTAL</b> This Period (last page this line number only).....▶</p>			<div> <div></div> </div>		

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

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

FOR LINE NUMBER: PAGE 246 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MCMANUS, JIM, , ,**

Mailing Address **88 CHESTNUT ST**

City  
**WESTON**

State  
**MA**

Zip Code  
**02493-1533**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**COMM. REAL ESTATE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1200.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA17.300167**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MCRAE, BETTY H, , ,**

Mailing Address **8101 NORTH 47TH STREET**

City

**PARADISE VALLEY**

State

**AZ**

Zip Code

**85253-2907**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.295791**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MEEK, THOMAS, , ,**

Mailing Address **80 PRESTWICK**

City

**ODESSA**

State

**TX**

Zip Code

**79762-5200**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 30 / 2016**

**Transaction ID : SA17.305939**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**2250.00**

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

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

FOR LINE NUMBER: PAGE 247 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MERCHENT, ROBERT, , ,**

Mailing Address **2405 PERCH COVE**

City  
**GAUTIER**

State  
**MS**

Zip Code  
**39553-6709**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**CONSULTANT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 26 / 2016**

**Transaction ID : SA17.304625**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MEYERS, AARON, , ,**

Mailing Address **837 COMMONS PARK**

City  
**STATHAM**

State  
**GA**

Zip Code  
**30666-2540**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295089**

Amount of Each Receipt this Period

**5000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MILES, JEFFREY, , ,**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**THE MILES ORGANIZATION, INC.**

Occupation (for Individual)  
**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295944**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**6000.00**

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

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

FOR LINE NUMBER: PAGE 248 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MILLER, ANNE C., , ,**

Mailing Address 35 EAST 75 ST.  
 7A

City  
 NEW YORK

State  
 NY

Zip Code  
 10021-2762

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

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  
 05 / 09 / 2016

Transaction ID : SA17.299307

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MILLER, GARY, , ,**

Mailing Address 9614 STERN LANE

City  
 BROWNS VALLEY

State  
 CA

Zip Code  
 95918-9707

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 REAL ESTATE BROKERAGE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2016

Transaction ID : SA17.302427

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MILLER, GARY, , ,**

Mailing Address 9614 STERN LANE

City  
 BROWNS VALLEY

State  
 CA

Zip Code  
 95918-9707

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 REAL ESTATE BROKERAGE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016

Transaction ID : SA17.306036

Amount of Each Receipt this Period

75.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

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

1175.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 249 OF 389  
(check only one)

<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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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**Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MILLER, GARY, , ,**Mailing Address **9614 STERN LANE**City  
**BROWNS VALLEY**State  
**CA**Zip Code  
**95918-9707**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**SELF**Occupation (for Individual)  
**REAL ESTATE BROKERAGE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

**Transaction ID : SA17.306479**

Amount of Each Receipt this Period

**50.00**
☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MILLER, GLYNNE, , ,**Mailing Address **755 S. EDGEVIEW CIRCLE**City  
**ANAHEIM**State  
**CA**Zip Code  
**92808-1402**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**EXCEL TIRE**Occupation (for Individual)  
**SALES/MARKETING**

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
05		23		2016

**Transaction ID : SA17.302337**

Amount of Each Receipt this Period

**250.00**
☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MILLS, HOWARD, , ,**Mailing Address **9 DARLENE DRIVE**City  
**GOSHEN**State  
**NY**Zip Code  
**10924-5045**FEC ID number of contributing  
federal political committee.**C**Name of Employer (for Individual)  
**DELOITTE LLP**Occupation (for Individual)  
**CONSULTANT**

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
05		03		2016

**Transaction ID : SA17.293569**

Amount of Each Receipt this Period

**250.00**
☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►**550.00****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 250 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MILOSEVICH, JOE, , ,**

Mailing Address 1628 HI-WAY 602

City  
VANDERWAGEN

State  
NM

Zip Code  
87326-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
JOE MILO'S

Occupation (for Individual)  
SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **21** / **2016**

**Transaction ID : SA17.303627**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MIRZA, VIVIAN, , ,**

Mailing Address 4 WALLIS LANE

City  
ST. JAMES

State  
NY

Zip Code  
11780-4114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DR. ATHER MIRZA

Occupation (for Individual)  
NURSE EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.309052**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MITCHEM, DENNIS, , ,**

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 (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**05** / **03** / **2016**

**Transaction ID : SA17.293565**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

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

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

FOR LINE NUMBER: PAGE 251 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MITCHUM, FRANK, , ,**

Mailing Address 12106 SUMMERLAND RIDGE LN

City  
**HOUSTON**

State  
**TX**

Zip Code  
**77041-6894**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.301911**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MITCHELL, GEORJAN, , ,**

Mailing Address 31 SUMMERHILL

City  
**CHESTERFIELD**

State  
**MO**

Zip Code  
**63017-8408**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ANDREW G MITCHELL INC**

Occupation (for Individual)  
**R.N.**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**650.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA17.300357**

Amount of Each Receipt this Period

**150.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MITCHELL, GEORJAN, , ,**

Mailing Address 31 SUMMERHILL

City  
**CHESTERFIELD**

State  
**MO**

Zip Code  
**63017-8408**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ANDREW G MITCHELL INC**

Occupation (for Individual)  
**R.N.**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**650.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.303620**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**900.00**

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

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

FOR LINE NUMBER: PAGE 252 OF 389

(check only one)

<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

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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MITCHELL, ROB, , ,**

Mailing Address **901 NORTH MAIN**

City  
**SIKESTON**

State  
**MO**

Zip Code  
**63801-5041**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**MITCHELL INSURANCE, INC.**

Occupation (for Individual)  
**INSURANCE BROKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.296378**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MITRAKAS, GREGORY, , ,**

Mailing Address **297 EAST MAIN ST**

City

**MARLBOROUGH**

State

**MA**

Zip Code

**01752-5421**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA17.294061**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MITSCH, RONALD, , ,**

Mailing Address **4 CHARLEY LAKE CT.**

City

**NORTH OAKS**

State

**MN**

Zip Code

**55127-6219**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295231**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1000.00**

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

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

FOR LINE NUMBER: PAGE 253 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MONCARZ, PIOTR D, , ,**

Mailing Address 3255 EMERSON ST

City  
 PALO ALTO

State  
 CA

Zip Code  
 94306-2943

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 GEOTHERMIC SOLUTION LLC

Occupation (for Individual)  
 ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295723**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MORADOF, PERRY, , ,**

Mailing Address 23 HORSESHOE RD

City  
 OLD WESTBURY

State  
 NY

Zip Code  
 11568-1144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SHELTER ROCK DEV GROUP

Occupation (for Individual)  
 BUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.297164**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MORROW, KATHLEEN, , ,**

Mailing Address 1620 TROON NORTH

City  
 EL DORADO

State  
 KS

Zip Code  
 67042-4363

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 KANSAS BASEMENT & FOUNDATION REPAIR

Occupation (for Individual)  
 BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.305105**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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

FOR LINE NUMBER: PAGE 254 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MORSE, TONI, , ,**

Mailing Address 13931 N. 503 RD.

City  
TAHLEQUAH

State  
OK

Zip Code  
74464-0328

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.303615**

Amount of Each Receipt this Period

350.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MOUNTAIN, ROBERT, , ,**

Mailing Address 508 WEST LYON FARM DRIVE

City  
GREENWICH

State  
CT

Zip Code  
06831-4360

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MCM, INC.

Occupation (for Individual)  
RIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.296880**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MULLANEY, KATHRYN, , ,**

Mailing Address P.O. BOX 3127

City  
NARRAGANSETT

State  
RI

Zip Code  
02882-0795

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **23** / **2016**

**Transaction ID : SA17.302779**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MUMMERT-PORTKO, JOYCE, , ,**

Mailing Address 723 SHAWNEE DR.

City  
 AUBURN

State  
 PA

Zip Code  
 17922-9570

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 SELF

Occupation (for Individual)  
 HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.297038**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MUNCEY, FRAN, , ,**

Mailing Address 10364 RUSSELL ROAD

City  
 LA MESA

State  
 CA

Zip Code  
 91941-4327

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 BILL MUNCEY IND, INC,

Occupation (for Individual)  
 RESTAURANTS {2}

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **27** / **2016**

**Transaction ID : SA17.305958**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MURDOUGH, SAMUEL, , ,**

Mailing Address 5801 BENT PINE DR.

City  
 VERO BEACH

State  
 FL

Zip Code  
 32967-7589

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

**05** / **02** / **2016**

**Transaction ID : SA17.293518**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00

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

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

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MURDOUGH, SAMUEL, , ,**

Mailing Address **5801 BENT PINE DR.**

City  
**VERO BEACH**

State  
**FL**

Zip Code  
**32967-7589**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1450.00**

Date of Receipt

**05 / 04 / 2016**

**Transaction ID : SA17.293592**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MURDOUGH, SAMUEL, , ,**

Mailing Address **5801 BENT PINE DR.**

City  
**VERO BEACH**

State  
**FL**

Zip Code  
**32967-7589**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1450.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA17.293990**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MURDOUGH, SAMUEL, , ,**

Mailing Address **5801 BENT PINE DR.**

City  
**VERO BEACH**

State  
**FL**

Zip Code  
**32967-7589**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1450.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.304627**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**850.00**



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

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

FOR LINE NUMBER: PAGE 257 OF 389

(check only one)

<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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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MURDOUGH, SAMUEL, , ,**

Mailing Address **5801 BENT PINE DR.**

City  
**VERO BEACH**

State  
**FL**

Zip Code  
**32967-7589**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1450.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.304630**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MURDOUGH, THOMAS, , ,**

Mailing Address **102 FIRST ST.  
 SUITE 205**

City  
**HUDSON**

State  
**OH**

Zip Code  
**44236-5386**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5400.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.302602**

Amount of Each Receipt this Period

**5400.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MURPHY, TERENCE, , ,**

Mailing Address **5606 NETHERLAND CT.**

City  
**DALLAS**

State  
**TX**

Zip Code  
**75229-5567**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.303634**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**6900.00**

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

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MUSSER, JOHN, , ,**

Mailing Address **515 MULBERRY HTS**

City  
**POMEROY**

State  
**OH**

Zip Code  
**45769-9573**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SIMMONS-MUSSER AND WARNER**

Occupation (for Individual)  
**INSURANCE AGENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.296377**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MYERS, TOM, , ,**

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 (for Individual)  
**ALL STAR LANES & CASINO**

Occupation (for Individual)  
**OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA17.293725**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NABRZESKI, ROBERT, , ,**

Mailing Address **2330 NE 28TH ST**

City  
**POMPANO BEACH**

State  
**FL**

Zip Code  
**33064-8236**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ALL CURRENT.COM**

Occupation (for Individual)  
**CEO**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.302341**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NABRZESKI, ROBERT, , ,**

Mailing Address 2330 NE 28TH ST

City  
POMPANO BEACH

State  
FL

Zip Code  
33064-8236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ALL CURRENT.COM

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305930**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NAGLE, KEVIN, , ,**

Mailing Address 960 VILLA DEL SOL

City  
EL DORADO HILLS

State  
CA

Zip Code  
95762-3568

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
THE NAGLE COMPANY

Occupation (for Individual)  
BUSINESSMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295137**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NELSON, MATTHEW, , ,**

Mailing Address 22129 N. YANKEE LANE

City  
CHILLICOTHE

State  
IL

Zip Code  
61523-9343

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ALLIED WELDING INC.

Occupation (for Individual)  
SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.302334**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NICHOLAS, PHYLLIS, W., ,**

Mailing Address **40 HOWARD ROAD**

City  
**GREENWICH**

State  
**CT**

Zip Code  
**06831-3104**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.296023**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NICHOLAS, PHYLLIS, W., ,**

Mailing Address **40 HOWARD ROAD**

City  
**GREENWICH**

State  
**CT**

Zip Code  
**06831-3104**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.305452**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NICKERSON, STUART, , ,**

Mailing Address **2503 HUTCHINSON COURT**

City  
**BURLINGTON**

State  
**NC**

Zip Code  
**27215-9831**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 28 / 2016**

**Transaction ID : SA17.305942**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**450.00**

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

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

FOR LINE NUMBER: PAGE 261 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NINAN, PRASAD (JOE), , ,**

Mailing Address **6734 SAUERKRAUT LANE**

City  
**MACUNGIE**

State  
**PA**

Zip Code  
**18062-8987**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**EINSTEIN MEDICAL CENTER PHILADELPHIA**

Occupation (for Individual)  
**POLYSOMNOGRAM TECHNOLOGIST**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295430**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NOCELLA, ELISE, , ,**

Mailing Address **8592 MAJORCA**

City  
**NAPLES**

State  
**FL**

Zip Code  
**34114-6435**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**AT HOME MEDICAL**

Occupation (for Individual)  
**BUSINESS OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**05 / 09 / 2016**

**Transaction ID : SA17.299298**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NOCELLA, ELISE, , ,**

Mailing Address **8592 MAJORCA**

City  
**NAPLES**

State  
**FL**

Zip Code  
**34114-6435**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**AT HOME MEDICAL**

Occupation (for Individual)  
**BUSINESS OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.301897**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**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  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NOE, LARRY, , ,**

Mailing Address **260 CAMBRIDGE WAY**

City  
**CAMPBELLSVILLE**

State  
**KY**

Zip Code  
**42718-7909**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SAVER GROUP INC**

Occupation (for Individual)  
**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.302880**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NOLL, JOHN, DAVID, ,**

Mailing Address **P.O. BOX 1198**

City  
**BIG TIMBER**

State  
**MT**

Zip Code  
**59011-1198**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5400.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294607**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NOLL, JOHN, DAVID, ,**

Mailing Address **P.O. BOX 1198**

City  
**BIG TIMBER**

State  
**MT**

Zip Code  
**59011-1198**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**5400.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.299867**

Amount of Each Receipt this Period

**2700.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**5650.00**

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

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

FOR LINE NUMBER: PAGE 263 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NOVAK, BEVERLY, , ,**

Mailing Address 202 MAY ST

City  
ELMHURST

State  
IL

Zip Code  
60126-4004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)

INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA17.294041**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. O'CONNELL, WILLIAM, , ,**

Mailing Address 4862 POST OAK TIMBER

City  
HOUSTON

State  
TX

Zip Code  
77056-2210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.297058**

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. OAKLEY, GRETCHEN, , ,**

Mailing Address 7225 PELICAN BAY BLVD.  
603

City  
NAPLES

State  
FL

Zip Code  
34108-5515

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.302601**

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1250.00

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

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

FOR LINE NUMBER: PAGE 264 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ODELL, ROBERT, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div>
Mailing Address <b>9632 GRAND ISLE LN</b>			<b>Transaction ID : SA17.295980</b>
City <b>LAS VEGAS</b>	State <b>NV</b>	Zip Code <b>89144-0839</b>	Amount of Each Receipt this Period <div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>SELF</b>		Occupation (for Individual) <b>PHYSICIAN</b>	<b>NON CONTRIBUTION ACCOUNT</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ODLAND, LYNN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 18 / 2016</div> </div>
Mailing Address <b>5 OWLSWOOD ROAD</b>			<b>Transaction ID : SA17.302429</b>
City <b>BELVEDERE TIBURON</b>	State <b>CA</b>	Zip Code <b>94920-1548</b>	Amount of Each Receipt this Period <div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>	<b>NON CONTRIBUTION ACCOUNT</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. OESTREICH, JAMES, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div>
Mailing Address <b>317 LIXTON CT</b>			<b>Transaction ID : SA17.295347</b>
City <b>ROSEVILLE</b>	State <b>CA</b>	Zip Code <b>95747-9504</b>	Amount of Each Receipt this Period <div> <div>1000.00</div> </div>
FEC ID number of contributing federal political committee. <div> <div>C</div> </div>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) <b>SILVER PEAK SOLUTIONS,INC.</b>		Occupation (for Individual) <b>PRESIDENT</b>	<b>NON CONTRIBUTION ACCOUNT</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>1000.00</div> </div>	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00



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

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

FOR LINE NUMBER: PAGE 265 OF 389  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. OLSON, BEVERLY K, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2016	
Mailing Address 200 IDLE HOUR DRIVE			Transaction ID : SA17.303633	
City MACON	State GA	Zip Code 31210-4702	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) 1842 INN		Occupation (for Individual) BED AND BREAKFAST	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. OLSON, GEORGE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 26 / 2016	
Mailing Address 5206 W 80TH TERRACE			Transaction ID : SA17.305495	
City PRAIRIE VILLAGE	State KS	Zip Code 66208-4913	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. ONEAL, BOB, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016	
Mailing Address 10103 LONDWOODS CT.			Transaction ID : SA17.305509	
City HOUSTON	State TX	Zip Code 77024-	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2250.00

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

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

FOR LINE NUMBER: PAGE 266 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. OREFFICE, PAUL, F., ,**

Mailing Address 6850 E CUARENTA CT

City  
PARADISE VALLEY

State  
AZ

Zip Code  
85253-4802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.300126**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ORTH, ROBERT, , ,**

Mailing Address 1600 NW 12THST

City  
BLUE SPRINGS

State  
MO

Zip Code  
64015-1776

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

**05 / 02 / 2016**

**Transaction ID : SA17.293521**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ORTH, ROBERT, , ,**

Mailing Address 1600 NW 12THST

City  
BLUE SPRINGS

State  
MO

Zip Code  
64015-1776

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.294613**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1050.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 267 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ORTH, ROBERT, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 16 / 2016</div> </div>	
Mailing Address 1600 NW 12THST			<b>Transaction ID : SA17.299793</b>	
City BLUE SPRINGS	State MO	Zip Code 64015-1776	Amount of Each Receipt this Period <div> <div></div> <div>25.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>205.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. OSGOOD, JEFFREY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 18 / 2016</div> </div>	
Mailing Address 901 MAIN STREET - SUITE 4400			<b>Transaction ID : SA17.303624</b>	
City DALLAS	State TX	Zip Code 75202-3729	Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) STRASBURGER & PRICE LLP		Occupation (for Individual) ATTORNEY	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>500.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. OWEN, GUS, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 09 / 2016</div> </div>	
Mailing Address 10455 N. CENTRAL EXPY. 109-332			<b>Transaction ID : SA17.299300</b>	
City DALLAS	State TX	Zip Code 75231-2213	Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div></div> <div>250.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

775.00

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

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

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(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PACE, JR., ASHLEY, , ,**

Mailing Address **615 BAYSHORE DRIVE**  
**APT.1001**

City  
**PENSACOLA**

State  
**FL**

Zip Code  
**32507-3571**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.306088**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PARDEE JR., JAMES, , ,**

Mailing Address **7311 SANTA BARBARA STREET**

City  
**CARLSBAD**

State  
**CA**

Zip Code  
**92011-4638**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**JD FARMS**

Occupation (for Individual)  
**FARMING**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.309062**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PARLIN, ED, , ,**

Mailing Address **10 CHESTNUT DR.**

City  
**SALEM**

State  
**NH**

Zip Code  
**03079-4251**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.305490**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**

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

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

FOR LINE NUMBER: PAGE 269 OF 389

(check only one)

<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

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**

<b>A. PARMATER, RICK, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 515 E AVE. City VINTON State IA Zip Code 52349-1250 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 25 / 2016 <b>Transaction ID : SA17.304619</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. PARRY, SANDRA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 46340 MONTE SERENO DR. City INDIAN WELLS State CA Zip Code 92210-9166 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2700.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.305512</b> Amount of Each Receipt this Period 2700.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. PATTON, THOMAS M, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3415 VITTORIA PL UNIT 5 City SAN JOSE State CA Zip Code 95136-3779 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) CYPRESS SEMICONDUCTOR Occupation (for Individual) CPA 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 05 / 17 / 2016 <b>Transaction ID : SA17.303602</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			3200.00
<b>TOTAL</b> 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 270 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PAVELSKI, RICHARD, , ,**

Mailing Address 145 CHESHIRE WAY

City  
**NAPLES**

State  
**FL**

Zip Code  
**34110-4408**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**HEARTLAND FARMS, INC.**

Occupation (for Individual)  
**FARMER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 09 / 2016**

**Transaction ID : SA17.309110**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PEARCE, DENNY, , ,**

Mailing Address 6605 GESSNER

City  
**HOUSTON**

State  
**TX**

Zip Code  
**77040-4015**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**THE NUT PLACE, INC**

Occupation (for Individual)  
**BUSINESS OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.303836**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PEDERSEN, CURTIS, , ,**

Mailing Address 8000 DRIFTWOOD

City  
**FENTON**

State  
**MI**

Zip Code  
**48430-8981**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.306328**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 271 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. PEKOLA, RUBY GAIL, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2016
Mailing Address 7022 GREATWOOD TRAILS COURT			Transaction ID : SA17.303614
City SUGAR LAND	State TX	Zip Code 77479-6202	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) HOUSEHOLD		Occupation (for Individual) STAY AT HOME MOM	NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. PELZAR, CHRISTOPHER, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016
Mailing Address 70 HIGH VALLEY DRIVE			Transaction ID : SA17.302465
City CANTON	State CT	Zip Code 06019-4523	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) ACTIVATE THE SPACE LLC.		Occupation (for Individual) CEO	NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. PEMBERTON, LEWIS, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2016
Mailing Address 9820 STONEBRIDGE DR.			Transaction ID : SA17.302351
City YUKON	State OK	Zip Code 73099-3247	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) MIKE JORDAN CO.		Occupation (for Individual) OILFIELD SALES	NON CONTRIBUTION ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00	

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2300.00

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

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

FOR LINE NUMBER: PAGE 272 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSEN, WAYNE, , ,**

Mailing Address 30 15 MILE RD NW

City  
 SPARTA

State  
 MI

Zip Code  
 49345-9539

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.303605**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PETERSON, WILLIAM, , ,**

Mailing Address 2601 SWOOP CIRCLE

City

KISSIMMEE

State

FL

Zip Code

34741-7831

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.303611**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PETRONE, AUGUSTA, , ,**

Mailing Address P.O. BOX 1037

City

DUBLIN

State

NH

Zip Code

03444-1037

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**05** / **10** / **2016**

**Transaction ID : SA17.293973**

Amount of Each Receipt this Period

10.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

510.00



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

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

FOR LINE NUMBER: PAGE 273 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. PETRONE, AUGUSTA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P.O. BOX 1037 City DUBLIN State NH Zip Code 03444-1037 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016 <b>Transaction ID : SA17.304621</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. PETRONE, AUGUSTA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P.O. BOX 1037 City DUBLIN State NH Zip Code 03444-1037 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 26 / 2016 <b>Transaction ID : SA17.304624</b> Amount of Each Receipt this Period 490.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. PETRONE, LOUIS, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 11926 ESTY WAY City CARMEL State IN Zip Code 46033-8128 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) 1945 Occupation (for Individual) SELF EMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2016 <b>Transaction ID : SA17.299829</b> Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			790.00
<b>TOTAL</b> 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 274 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PETRONE, LOUIS, , ,**

Mailing Address 11926 ESTY WAY

City  
**CARMEL**

State  
**IN**

Zip Code  
**46033-8128**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**1945**

Occupation (for Individual)  
**SELF EMPLOYED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**225.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.301757**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PEZOLD, JOHN, , ,**

Mailing Address 40 SPRING HARBOR CIRCLE

City  
**COLUMBUS**

State  
**GA**

Zip Code  
**31904-4617**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**PEZOLD MANAGEMENT**

Occupation (for Individual)  
**EXECUTIVE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305121**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PHILLIPS, VINCENT, , ,**

Mailing Address 3838 SAN DIMAS ST.  
**B-231**

City  
**BAKERSFIELD**

State  
**CA**

Zip Code  
**93301-2284**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**SURGEON**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.301912**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**525.00**

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

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

FOR LINE NUMBER: PAGE 275 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. PHILLIPS, WENDELL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 33173 MULHOLLAND HWY. City MALIBU State CA Zip Code 90265-2434 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY 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 05 / 25 / 2016 <b>Transaction ID : SA17.304613</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. PIEMONTE, JOHN L, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1448 W FLOURNOY ST City CHICAGO State IL Zip Code 60607-3204 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2016 <b>Transaction ID : SA17.300348</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. PIEMONTE, JOHN L, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1448 W FLOURNOY ST City CHICAGO State IL Zip Code 60607-3204 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 <b>Transaction ID : SA17.305050</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			450.00
<b>TOTAL</b> 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 276 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PIERCE, DAVID, , ,**

Mailing Address **58 MCGOWAN ROAD**

City  
**OGDENSBURG**

State  
**NY**

Zip Code  
**13669-4325**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.303604**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PIONTEK, WALTER, , ,**

Mailing Address **10171 CLOVER GLEN DR.**

City  
**VIENNA**

State  
**VA**

Zip Code  
**22181-2969**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.302348**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PISTORINO, JOHN, , ,**

Mailing Address **6535 SW 123 ST**

City  
**MIAMI**

State  
**FL**

Zip Code  
**33156-5554**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**PISTORINO AND ALAM ENGINEERS**

Occupation (for Individual)  
**PROFESSIONAL ENGINEER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 28 / 2016**

**Transaction ID : SA17.305940**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 277 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. POPHAM, JACK, , ,</b></p> <p>Mailing Address <b>7318 LORNA RD</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 15 / 2016</div> </div> </p> <p><b>Transaction ID : SA17.300123</b></p>	
<p>City <b>MONTGOMERY</b></p> <p>State <b>TX</b></p> <p>Zip Code <b>77316-6854</b></p>	<p>Amount of Each Receipt this Period  <div> <div>250.00</div> </div> </p>		<p><input type="checkbox"/> Memo Item CONTRIBUTION</p> <p><input type="checkbox"/> NON CONTRIBUTION ACCOUNT</p>	
<p>FEC ID number of contributing federal political committee. <b>C</b></p>				
<p>Name of Employer (for Individual) <b>SELF</b></p>		<p>Occupation (for Individual) <b>INSURANCE BROKER</b></p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p>		<p>Aggregate Year-to-Date ▼  <div> <div>250.00</div> </div> </p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. PORTNER, MARVIN, , ,</b></p> <p>Mailing Address <b>865 NAPOLI DRIVE</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 25 / 2016</div> </div> </p> <p><b>Transaction ID : SA17.305115</b></p>	
<p>City <b>PACIFIC PALISADES</b></p> <p>State <b>CA</b></p> <p>Zip Code <b>90272-4515</b></p>	<p>Amount of Each Receipt this Period  <div> <div>250.00</div> </div> </p>		<p><input type="checkbox"/> Memo Item CONTRIBUTION</p> <p><input type="checkbox"/> NON CONTRIBUTION ACCOUNT</p>	
<p>FEC ID number of contributing federal political committee. <b>C</b></p>				
<p>Name of Employer (for Individual) <b>PORTNERMEDICAL CORP</b></p>		<p>Occupation (for Individual) <b>PHYSICIAN</b></p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p>		<p>Aggregate Year-to-Date ▼  <div> <div>250.00</div> </div> </p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. POTTS, HENRY, , ,</b></p> <p>Mailing Address <b>4708 RIVER BANK CIR SE</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 19 / 2016</div> </div> </p> <p><b>Transaction ID : SA17.296793</b></p>	
<p>City <b>OWENS CROSS ROADS</b></p> <p>State <b>AL</b></p> <p>Zip Code <b>35763-5801</b></p>	<p>Amount of Each Receipt this Period  <div> <div>500.00</div> </div> </p>		<p><input type="checkbox"/> Memo Item CONTRIBUTION</p> <p><input type="checkbox"/> NON CONTRIBUTION ACCOUNT</p>	
<p>FEC ID number of contributing federal political committee. <b>C</b></p>				
<p>Name of Employer (for Individual) <b>ALTUM LLC</b></p>		<p>Occupation (for Individual) <b>ENGINEER</b></p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)         </p>		<p>Aggregate Year-to-Date ▼  <div> <div>500.00</div> </div> </p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....▶</p>			<div> <div>1000.00</div> </div>	
<p><b>TOTAL</b> This Period (last page this line number only).....▶</p>			<div> <div></div> </div>	

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 278 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PRATT, JOHN, T., ,**

Mailing Address 1479 SW SHORELINE DR.

City  
PALM CITY

State  
FL

Zip Code  
34990-4535

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27500.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.303637**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PRATT, JOHN, T., ,**

Mailing Address 1479 SW SHORELINE DR.

City  
PALM CITY

State  
FL

Zip Code  
34990-4535

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27500.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.307069**

Amount of Each Receipt this Period

24500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. PROFILI, RON, , ,**

Mailing Address 33 OLD COACH ROAD

City  
NAPA

State  
CA

Zip Code  
94558-3858

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305489**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

27250.00

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

Use separate schedule(s)  
for each category of the  
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(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. PRY, PETER, VINCENT, DR.,**

Mailing Address 300 WINDSWEEP ROAD

City  
MINERAL

State  
VA

Zip Code  
23117-4845

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

EMP TASK FORCE ON NATIONAL AND HOMELAN

Occupation (for Individual)

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.307056**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. PYLE, SARAH, , ,**

Mailing Address 3707 GILBERT ABE  
17

City  
DALLAS

State  
TX

Zip Code  
75219-4316

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.304622**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. QUANDT, DWAIN, , ,**

Mailing Address 6029 NW ALFALFA DR.

City  
PORTLAND

State  
OR

Zip Code  
97229-9219

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **26** / **2016**

**Transaction ID : SA17.305127**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1050.00

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

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

FOR LINE NUMBER: PAGE 280 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAE, DAISY R., , ,**

Mailing Address 8220 OLD MILL DR.

City  
PINCKNEY

State  
MI

Zip Code  
48169-8924

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.300166**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAMSEY, GERALD, , ,**

Mailing Address 6300 RICHMOND PLACE

City  
NORFOLK

State  
VA

Zip Code  
23508-1128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
INSTANT SYSTEMS

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.303623**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RAY, RANDY, , ,**

Mailing Address 3481 ROCKCLIFF PLACE

City  
LONGWOOD

State  
FL

Zip Code  
32779-3143

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MARKETQ.NET

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305132**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00



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

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

FOR LINE NUMBER: PAGE 281 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. REARDON, MICHAEL, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 21 / 2016</div> </div>	
Mailing Address 330 WEST 39TH STREET <div>4D</div>			Transaction ID : <b>SA17.303838</b>	
City NEW YORK	State NY	Zip Code 10018-1780	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) CIGNA		Occupation (for Individual) M.D.	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>250.00</div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. REDFERN, KEN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div>	
Mailing Address 6203 SKAHAN LANE			Transaction ID : <b>SA17.295230</b>	
City AUSTIN	State TX	Zip Code 78739-1687	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) DANIELS-HEAD MANAGEMENT CORP.		Occupation (for Individual) INSURANCE EXECUTIVE	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>500.00</div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. REEDMD, MELVIN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 20 / 2016</div> </div>	
Mailing Address 1248 FRICK ROAD			Transaction ID : <b>SA17.303575</b>	
City LEONARD	State MI	Zip Code 48367-3174	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div>250.00</div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

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

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

FOR LINE NUMBER: PAGE 282 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. REEDMD, MELVIN, , ,**

Mailing Address 1248 FRICK ROAD

City  
 LEONARD

State  
 MI

Zip Code  
 48367-3174

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305353**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. REEVES, DAN, , ,**

Mailing Address 785 WEST CONWAY DR.

City  
 ATLANTA

State  
 GA

Zip Code  
 30327-3633

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **10** / **2016**

**Transaction ID : SA17.309085**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. REID, WILLAM, , ,**

Mailing Address 445 MADISON ST

City  
 DENVER

State  
 CO

Zip Code  
 80206-4438

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295804**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2800.00

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

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

FOR LINE NUMBER: PAGE 283 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. REINDERS, REINT, , ,**

Mailing Address 12380 RUE CHEAUMONT

City  
SAN DIEGO

State  
CA

Zip Code  
92131-3211

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.305483**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. REISS, CLAIRE K. T., , ,**

Mailing Address 9675 LA JOLLA FARMS ROAD

City  
LA JOLLA

State  
CA

Zip Code  
92037-1132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.307061**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RENNER, WALTER, , ,**

Mailing Address 11 TURNBERRY CT

City  
HALF MOON BAY

State  
CA

Zip Code  
94019-2606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.302434**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 284 OF 389

<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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RESSEL, JR., RONALD, , ,**

Mailing Address P.O. BOX 1081

City  
MARTINSVILLEState  
VAZip Code  
24114-1081FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE RONBUILT CORPORATIONOccupation (for Individual)  
OWNER OF WOOD PRODUCTS MFG

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
05	/	12	/	2016

Transaction ID : SA17.300122

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RETZLER, ANNE, , ,**

Mailing Address P.O. BOX 79587

City  
HOUSTONState  
TXZip Code  
77279-9587FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

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
05	/	12	/	2016

Transaction ID : SA17.295336

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIDGE, JENNIFER, , ,**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELFOccupation (for Individual)  
DERMATOLOGIST

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
05	/	14	/	2016

Transaction ID : SA17.296214

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 285 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. RIGHTER, BREWSTER, , ,**

Mailing Address 760 CHICKEN VALLEY RD.

City State Zip Code  
 LOCUST VALLEY NY 11560-2605

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

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  
 05 / 31 / 2016

Transaction ID : SA17.305116

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. RINDLAUB, SARAH, , ,**

Mailing Address 8441 SE 68TH ST.  
 217

City State Zip Code  
 MERCER ISLAND WA 98040-5235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
 N/A

Occupation (for Individual)  
 HOMEMAKER

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  
 05 / 31 / 2016

Transaction ID : SA17.305135

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ROBERTSON, EILEEN M., , ,**

Mailing Address P. O. BOX 163

City State Zip Code  
 HUMBOLDT KS 66748-0163

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 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  
 05 / 17 / 2016

Transaction ID : SA17.303619

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00

<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	11a	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	11b	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	11c	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	12		
<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	13	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	14	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	15	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	16	<div style="border: 1px solid black; padding: 2px;">X</div>	17

NAME OF COMMITTEE (In Full)  
GREAT AMERICA PAC

NON CONTRIBUTION ACCOUNT

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	52
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# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 287 OF 389

(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. RODDEY, JOHN B., , ,**

Mailing Address 12971 HIGHWAY 1

City  
OIL CITY

State  
LA

Zip Code  
71061-9122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.302436**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. RODELL, RICK, , ,**

Mailing Address 225 W. WICKLIFFE CREEK CIRCLE

City  
EADS

State  
TN

Zip Code  
38028-3316

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CORNERSTONE SYSTEMS

Occupation (for Individual)  
CHAIRMAN/FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.294836**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. RODELL, RICK, , ,**

Mailing Address 225 W. WICKLIFFE CREEK CIRCLE

City  
EADS

State  
TN

Zip Code  
38028-3316

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CORNERSTONE SYSTEMS

Occupation (for Individual)  
CHAIRMAN/FOUNDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.306324**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1100.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ROE, NANCY, , ,**

Mailing Address **8471 SE BRISTOL WAY**

City  
**JUPITER**

State  
**FL**

Zip Code  
**33458-1015**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**A NURSES REGISTRY, INC**

Occupation (for Individual)  
**NURSE ADMINISTRATOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.302430**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ROGERS, JON, , ,**

Mailing Address **1731 AVIATION BLVD**

City  
**LINCOLN**

State  
**CA**

Zip Code  
**95648-9317**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RFC**

Occupation (for Individual)  
**MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295275**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ROSS, CHARLES, , ,**

Mailing Address **325 CHERRY**

City  
**ARKADELPHIA**

State  
**AR**

Zip Code  
**71923-5114**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**HENRY SCHEIN MEDICAL**

Occupation (for Individual)  
**FIELD SALES CONSULTANT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA17.293669**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**600.00**



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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ROSS, CHARLES, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>	
Mailing Address 325 CHERRY			<b>Transaction ID : SA17.304601</b>	
City ARKADELPHIA	State AR	Zip Code 71923-5114	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) HENRY SCHEIN MEDICAL		Occupation (for Individual) FIELD SALES CONSULTANT	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. RUDD, JANN, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 12 / 2016</div> </div>	
Mailing Address 855 RAMAPO VALLEY ROAD			<b>Transaction ID : SA17.295203</b>	
City OAKLAND	State NJ	Zip Code 07436-2308	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. RUNQUIST, JON, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 26 / 2016</div> </div>	
Mailing Address 121 W WACKER DR. 35TH FLOOR			<b>Transaction ID : SA17.305126</b>	
City CHICAGO	State IL	Zip Code 60601-1781	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SONOMA CONSTRUCTION, LLC		Occupation (for Individual) GENERAL CONTRACTOR	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. RUSH, DOUG, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2016 <b>Transaction ID : SA17.300377</b>	
Mailing Address 3410 CREEK VIEW DR.			Amount of Each Receipt this Period 250.00	
City MEDFORD	State OR	Zip Code 97504-9624	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. RUSSELL, NORMAN, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2016 <b>Transaction ID : SA17.303632</b>	
Mailing Address 24348 SW BAKER ROAD			Amount of Each Receipt this Period 1000.00	
City SHERWOOD	State OR	Zip Code 97140-8406	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RUSSELL CONSTRUCTION		Occupation (for Individual) CONTRACTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. RUSSELL, ROBERT, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2016 <b>Transaction ID : SA17.296651</b>	
Mailing Address 2900 NE 26 PLACE			Amount of Each Receipt this Period 500.00	
City FT. LAUDERDALE	State FL	Zip Code 33306-1909	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) KRAEER FUNERAL HOME		Occupation (for Individual) FUNERAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. RUTHERFORD, MICHAEL G, , ,**

Mailing Address **8 GREENWAY PLAZA, ST 1400**

City  
**HOUSTON**

State  
**TX**

Zip Code  
**77046-0800**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**RANCHER, OIL & GAS PRODUCER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**2500.00**

Date of Receipt

**05 / 17 / 2016**

**Transaction ID : SA17.303636**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SAKIEWICZ, PAUL, , ,**

Mailing Address **11612 E BERRY AVE**

City  
**ENGLEWOOD**

State  
**CO**

Zip Code  
**80111-4155**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**COLORADO KIDNEY CARE PC**

Occupation (for Individual)  
**PHYSICIAN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.300360**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SALVATI, JOSEPH, , ,**

Mailing Address **3554 SPRINGBRIAR DR.**

City  
**CASTLE ROCK**

State  
**CO**

Zip Code  
**80109-7996**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**LOCKHEED MARTIN**

Occupation (for Individual)  
**SENIOR STF ENGINEER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 15 / 2016**

**Transaction ID : SA17.296342**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**3000.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SAMPLE, WILLIAM S, ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 16 / 2016</div> </div> <b>Transaction ID : SA17.296458</b>	
Mailing Address <b>4426 GLENOAKS CT.</b>			Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
City <b>WARREN</b>	State <b>MI</b>	Zip Code <b>48092-4196</b>	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>250.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SANSOM, JOHN, ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 26 / 2016</div> </div> <b>Transaction ID : SA17.304615</b>	
Mailing Address <b>9455 PENSACOLA BOULEVARD SUITE B</b>			Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>	
City <b>PENSACOLA</b>	State <b>FL</b>	Zip Code <b>32534-1237</b>	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) <b>JOHN M. SANSOM, P.A.</b>		Occupation (for Individual) <b>ACCOUNTANT</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>250.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SCHAFFNIT, BOBBIE, ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 11 / 2016</div> </div> <b>Transaction ID : SA17.294157</b>	
Mailing Address <b>P.O. BOX 1385</b>			Amount of Each Receipt this Period <div> <div></div> <div>100.00</div> </div>	
City <b>ROCKINGHAM</b>	State <b>NC</b>	Zip Code <b>28380-1385</b>	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) <b>RETIRED</b>		Occupation (for Individual) <b>RETIRED</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div></div> <div>475.00</div> </div>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<div> <div></div> <div>600.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only).....▶	<div> <div></div> <div></div> </div>

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 293 OF 389  
(check only one)

<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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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**Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SCHAFFNIT, BOBBIE, , ,**

Mailing Address P.O. BOX 1385

City  
ROCKINGHAMState  
NCZip Code  
28380-1385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	6		

Transaction ID : SA17.296373

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SCHAFFNIT, BOBBIE, , ,**

Mailing Address P.O. BOX 1385

City  
ROCKINGHAMState  
NCZip Code  
28380-1385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	6		

Transaction ID : SA17.296529

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SCHAFFNIT, BOBBIE, , ,**

Mailing Address P.O. BOX 1385

City  
ROCKINGHAMState  
NCZip Code  
28380-1385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	1	6		

Transaction ID : SA17.299808

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

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 PageFOR LINE NUMBER: PAGE 294 OF 389  
(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SCHAFFNIT, BOBBIE, , ,**

Mailing Address P.O. BOX 1385

City  
ROCKINGHAMState  
NCZip Code  
28380-1385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	5							1	2			2	0	1	6

Transaction ID : SA17.299815

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SCHAFFNIT, BOBBIE, , ,**

Mailing Address P.O. BOX 1385

City  
ROCKINGHAMState  
NCZip Code  
28380-1385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5							1	9			2	0

Transaction ID : SA17.301690

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SCHAFFNIT, BOBBIE, , ,**

Mailing Address P.O. BOX 1385

City  
ROCKINGHAMState  
NCZip Code  
28380-1385FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5							1	2	6		2	0

Transaction ID : SA17.304139

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SCHAFFNIT, BOBBIE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2016 <b>Transaction ID : SA17.304312</b>	
Mailing Address P.O. BOX 1385			Amount of Each Receipt this Period 25.00	
City ROCKINGHAM	State NC	Zip Code 28380-1385	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> CONTRIBUTION NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	Amount of Each Receipt this Period 25.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	<input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SCHAFFNIT, BOBBIE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 <b>Transaction ID : SA17.304397</b>	
Mailing Address P.O. BOX 1385			Amount of Each Receipt this Period 50.00	
City ROCKINGHAM	State NC	Zip Code 28380-1385	<input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> CONTRIBUTION NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	Amount of Each Receipt this Period 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	<input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SCHAFFNIT, BOBBIE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016 <b>Transaction ID : SA17.304517</b>	
Mailing Address P.O. BOX 1385			Amount of Each Receipt this Period 75.00	
City ROCKINGHAM	State NC	Zip Code 28380-1385	<input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> CONTRIBUTION NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	Amount of Each Receipt this Period 75.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 475.00	<input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT	
<b>SUBTOTAL</b> of Receipts This Page (optional).....			150.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

Use separate schedule(s)  
for each category of the  
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(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SCHMIDT, STANLEY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 13 / 2016</div> </div>	
Mailing Address P.O. BOX 137			<b>Transaction ID : SA17.300346</b>	
City DALLAS	State OR	Zip Code 97338-0137	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SELF		Occupation (for Individual) STATE FARM AGENT	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SCHMIDT, STANLEY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 19 / 2016</div> </div>	
Mailing Address P.O. BOX 137			<b>Transaction ID : SA17.303532</b>	
City DALLAS	State OR	Zip Code 97338-0137	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SELF		Occupation (for Individual) STATE FARM AGENT	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

  

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SCHMIDT, STANLEY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 25 / 2016</div> </div>	
Mailing Address P.O. BOX 137			<b>Transaction ID : SA17.304580</b>	
City DALLAS	State OR	Zip Code 97338-0137	Amount of Each Receipt this Period <div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SELF		Occupation (for Individual) STATE FARM AGENT	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....			<div> <div>300.00</div> </div>	
<b>TOTAL</b> This Period (last page this line number only).....			<div> <div></div> </div>	



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

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

FOR LINE NUMBER: PAGE 297 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SCHWARTZ, ROBERT, , ,**

Mailing Address **65293 EAST ROCKY MESA DR.**

City  
**TUCSON**

State  
**AZ**

Zip Code  
**85739-1694**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 26 / 2016**

**Transaction ID : SA17.305124**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SCHYMIK, GRETCHEN, , ,**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295941**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SCOTT, ROBERT, , ,**

Mailing Address **18129 NESTLEBRANCH COURT**

City  
**HUDSON**

State  
**FL**

Zip Code  
**34667-5575**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.297126**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1750.00**

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

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

FOR LINE NUMBER: PAGE 298 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SHAW, JIM, , ,**

Mailing Address 3931 E. 71ST STREET

City  
 INDIANAPOLIS

State  
 IN

Zip Code  
 46220-3783

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 CONCEPTION TO REALITY, INC.

Occupation (for Individual)  
 ENGINEERING, PM & CM COMPANY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **06** / **2016**

**Transaction ID : SA17.293662**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SHAW, JIM, , ,**

Mailing Address 3931 E. 71ST STREET

City  
 INDIANAPOLIS

State  
 IN

Zip Code  
 46220-3783

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 CONCEPTION TO REALITY, INC.

Occupation (for Individual)  
 ENGINEERING, PM & CM COMPANY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.305921**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SHEALY, JAMES, , ,**

Mailing Address P.O. BOX 710062

City  
 MAXEYS

State  
 GA

Zip Code  
 30671-0062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 KAKEGA, LLC

Occupation (for Individual)  
 FARMER/SMALL BUSINESS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.303600**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

Use separate schedule(s)  
for each category of the  
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(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SHELBY, MITCH, , ,**

Mailing Address **2213 CROWN POINT DRIVE**

City  
**CAPE GIRARDEAU**

State  
**MO**

Zip Code  
**63701-2572**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.302748**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SIEGFRIED, OLDBOB, , ,**

Mailing Address **628 86TH STREET**

City  
**DOWNERS GROVE**

State  
**IL**

Zip Code  
**60516-4936**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 14 / 2016**

**Transaction ID : SA17.295928**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SILVA, ALVARO, , ,**

Mailing Address **700 SUNSET DR.**

City  
**MIAMI**

State  
**FL**

Zip Code  
**33143-6239**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.300084**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

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

FOR LINE NUMBER: PAGE 300 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SILVERS, FREDERICK, , ,**

Mailing Address 10921 WILSHIRE BLVD SUITE 514

City  
LOS ANGELES

State  
CA

Zip Code  
90024-4001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
PHYSICIAN M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.295138**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SILVER, PRISCILLA, , ,**

Mailing Address 18811 MURIEL PLACE

City  
SANTA ANA

State  
CA

Zip Code  
92705-2817

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HOPE LUTHERAN CHURCH

Occupation (for Individual)  
MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **21** / **2016**

**Transaction ID : SA17.308690**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SIMPKINS, BERNIE, , ,**

Mailing Address 400 HIGHPOINT DR.  
SUITE 500

City  
COCOA

State  
FL

Zip Code  
32926-6661

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SIMPKINS REAL ESTATE, LLC

Occupation (for Individual)  
SELF-EMPLOYED BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **19** / **2016**

**Transaction ID : SA17.302438**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

1000.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. SIMS, HAROLD, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 536 BUFFLEHEAD DRIVE City JOHNS ISLAND State SC Zip Code 29455-5791 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016 <b>Transaction ID : SA17.305122</b> Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. SISK, DAVID, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 118 BIRCH WAY City SAN RAFAEL State CA Zip Code 94903-2943 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 21 / 2016 <b>Transaction ID : SA17.302335</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. SKAGGS, JAMES, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4700 TOREADOR DR. City AUSTIN State TX Zip Code 78746-2411 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 27 / 2016 <b>Transaction ID : SA17.305125</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1050.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SKINNER, C.B., , ,**

Mailing Address **6210 SAN JOSE BLVD W**

City  
**JACKSONVILLE**

State  
**FL**

Zip Code  
**32217-2370**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**FORESTRY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.302881**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SMITH, DARRELL, , ,**

Mailing Address **5221 BEVERLY DR.**

City  
**SAN ANGELO**

State  
**TX**

Zip Code  
**76904-8033**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.306350**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SMITHSON, DAVID, , ,**

Mailing Address **29 WATERCRESS**

City  
**IRVINE**

State  
**CA**

Zip Code  
**92603-0408**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**SELF**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.300097**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SMITH, RACHEL, , ,**

Mailing Address **578 BARCLAY STREET**

City  
**CRAIG**

State  
**CO**

Zip Code  
**81625-2734**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SMITH RANCHO LAND & LIVESTOCK**

Occupation (for Individual)  
**RANCHER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.303621**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SNYDER JR., RONALD, , ,**

Mailing Address **10412 SE 194TH PL**

City  
**RENTON**

State  
**WA**

Zip Code  
**98055-7313**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**BOEING CO**

Occupation (for Individual)  
**MACHINIST**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.305486**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SOCKWELL, SANDRA, , ,**

Mailing Address **4266 SAN FELIPE ROAD**

City  
**BULLHEAD CITY**

State  
**AZ**

Zip Code  
**86429-7700**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.303835**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1000.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. SORENSEN, VERLA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address City SAN JUAN CAPISTRAN State CA Zip Code 92675- FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 03 / 2016 <b>Transaction ID : SA17.293560</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. SORENSEN, VERLA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address City SAN JUAN CAPISTRAN State CA Zip Code 92675- FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 <b>Transaction ID : SA17.304628</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. SOUSA, MANUEL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 254 QUILL AVE City THE VILLAGES State FL Zip Code 32162-5034 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) NAVY Occupation (for Individual) AVIATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 <b>Transaction ID : SA17.293689</b> Amount of Each Receipt this Period 25.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1525.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			



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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. SOUSA, MANUEL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 254 QUILL AVE City THE VILLAGES State FL Zip Code 32162-5034 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) NAVY Occupation (for Individual) AVIATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2016 <b>Transaction ID : SA17.295976</b> Amount of Each Receipt this Period 25.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. SOUSA, MANUEL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 254 QUILL AVE City THE VILLAGES State FL Zip Code 32162-5034 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) NAVY Occupation (for Individual) AVIATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016 <b>Transaction ID : SA17.302686</b> Amount of Each Receipt this Period 25.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. SOUSA, MANUEL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 254 QUILL AVE City THE VILLAGES State FL Zip Code 32162-5034 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) NAVY Occupation (for Individual) AVIATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2016 <b>Transaction ID : SA17.302809</b> Amount of Each Receipt this Period 25.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			75.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SOUSA, MANUEL, , ,**

Mailing Address **254 QUILL AVE**

City  
**THE VILLAGES**

State  
**FL**

Zip Code  
**32162-5034**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**NAVY**

Occupation (for Individual)  
**AVIATOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**225.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.304297**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SOUSA, MANUEL, , ,**

Mailing Address **254 QUILL AVE**

City  
**THE VILLAGES**

State  
**FL**

Zip Code  
**32162-5034**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**NAVY**

Occupation (for Individual)  
**AVIATOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**225.00**

Date of Receipt

**05 / 29 / 2016**

**Transaction ID : SA17.305686**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SOUSA, MANUEL, , ,**

Mailing Address **254 QUILL AVE**

City  
**THE VILLAGES**

State  
**FL**

Zip Code  
**32162-5034**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**NAVY**

Occupation (for Individual)  
**AVIATOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**225.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.306147**

Amount of Each Receipt this Period

**25.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**75.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. STAGGS, RICK, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 17 / 2016 <b>Transaction ID : SA17.303601</b>	
Mailing Address 575 E LOCUST AVENUE SUITE 110			Amount of Each Receipt this Period 250.00	
City FRESNO	State CA	Zip Code 93720-2928	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RIVERPARK FINANCIAL GROUP		Occupation (for Individual) CFP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. STALLINGS, DON, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2016 <b>Transaction ID : SA17.301917</b>	
Mailing Address 300 S WESLEYAN BLVD			Amount of Each Receipt this Period 2500.00	
City ROCKY MOUNT	State NC	Zip Code 27804-4215	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2575.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. STANDIFORD, CONSTANCE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 <b>Transaction ID : SA17.293672</b>	
Mailing Address 1338 E 510 S			Amount of Each Receipt this Period 250.00	
City LAFAYETTE	State IN	Zip Code 47909-9024	<input type="checkbox"/> Memo Item CONTRIBUTION	
FEC ID number of contributing federal political committee. C			NON CONTRIBUTION ACCOUNT	
Name of Employer (for Individual) FARM OWNER-OPERATOR		Occupation (for Individual) SELFEMP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

3000.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. STANKO, JOHN P ., .,**

Mailing Address 12785 SILVERWOLF RD.

City  
RENO

State  
NV

Zip Code  
89511-4797

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CHAMPION CHEVROLET

Occupation (for Individual)  
CHEVROLET DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.307068**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. STAPLETON, SAMUEL, L., .**

Mailing Address 1473 INDEPENDENCE AVE

City

MELBOURNE

State

FL

Zip Code

32940-6811

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.305106**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. STARK, R. JOSEPH, ., .**

Mailing Address 6015 LAWRENCE DR.

City

INDIANAPOLIS

State

IN

Zip Code

46226-1026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **12** / **2016**

**Transaction ID : SA17.295359**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5500.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. STEEL, BARRY, , ,**

Mailing Address 1 GLEN ALPINE ROAD

City  
PHOENIX

State  
MD

Zip Code  
21131-2409

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295816**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. STELLATO, DONALD, , ,**

Mailing Address 240 DONLEA ROAD

City  
BARRINGTON

State  
IL

Zip Code  
60010-4015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.302754**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. STEPHENSON, PHIL, , ,**

Mailing Address 1609 N. RICHMOND RD. WHARTON, TEXA

City  
WHARTON

State  
TX

Zip Code  
77488-2711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
CERTIFIED PUBLIC ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **10** / **2016**

**Transaction ID : SA17.293993**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2000.00

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

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

FOR LINE NUMBER: PAGE 310 OF 389

(check only one)

<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

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**

<b>A. STEPHENSON, PHIL, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1609 N. RICHMOND RD. WHARTON, TEXA City WHARTON State TX Zip Code 77488-2711 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) SELF Occupation (for Individual) CERTIFIED PUBLIC ACCOUNTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016 <b>Transaction ID : SA17.307059</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. STEPPE, STEPHEN, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 54 SERRANO City ATHERTON State CA Zip Code 94027-3934 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) STOCKBRIDGE Occupation (for Individual) REAL ESTATE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016 <b>Transaction ID : SA17.305960</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. STEVENSON, BRUCE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3879 SHOREBIRD COURT City OSHKOSH State WI Zip Code 54904-7796 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 16 / 2016 <b>Transaction ID : SA17.299865</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		1750.00
<b>TOTAL</b> 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 311 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. STINSON, CHARLES, , ,**

Mailing Address P.O.BOX 62

City  
**PROSPECT HARBOR**

State  
**ME**

Zip Code  
**04669-0062**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.303494**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. STINSON, CHARLES, , ,**

Mailing Address P.O.BOX 62

City  
**PROSPECT HARBOR**

State  
**ME**

Zip Code  
**04669-0062**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.304556**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. STINSON, CHARLES, , ,**

Mailing Address P.O.BOX 62

City  
**PROSPECT HARBOR**

State  
**ME**

Zip Code  
**04669-0062**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 30 / 2016**

**Transaction ID : SA17.306049**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**300.00**

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

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

FOR LINE NUMBER: PAGE 312 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. STONEBACK, H NEAL, , ,**

Mailing Address **6175 GREEN DRIVE**

City  
**HARSENS ISLAND**

State  
**MI**

Zip Code  
**48028-9530**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.302326**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. STONE, ROBERT B., , ,**

Mailing Address **3107 E MARYLAND AVE**

City  
**PHOENIX**

State  
**AZ**

Zip Code  
**85016-2376**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295091**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. STRASNER, MARCIE, , ,**

Mailing Address **23439 ABBEY GLEN PLACE**

City  
**VALENCIA**

State  
**CA**

Zip Code  
**91354-1112**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 14 / 2016**

**Transaction ID : SA17.295872**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**



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

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

FOR LINE NUMBER: PAGE 313 OF 389

(check only one)

<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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STRAW, FRANK, , ,**

Mailing Address 32200 CANTLON DRIVE

City  
 WADSWORTH

State  
 NV

Zip Code  
 89442-

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 ENVTECH INC

Occupation (for Individual)  
 CHEMIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **11** / **2016**

**Transaction ID : SA17.294107**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STRAW, FRANK, , ,**

Mailing Address 32200 CANTLON DRIVE

City  
 WADSWORTH

State  
 NV

Zip Code  
 89442-

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 ENVTECH INC

Occupation (for Individual)  
 CHEMIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.296455**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUMMERS, FREDERICK, , ,**

Mailing Address 336 REYNOLDS DR.

City  
 EATONTON

State  
 GA

Zip Code  
 31024-5408

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 VFG EQUIPMENT FINANCE

Occupation (for Individual)  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.301914**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

850.00

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 314 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SUWANKOSAI, PUANGSRI, , ,**

Mailing Address 118 VICTORY ROAD  
315

City  
SPRINGFIELD

State  
NJ

Zip Code  
07081-1373

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2016

Transaction ID : SA17.297004

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SUWANKOSAI, PUANGSRI, , ,**

Mailing Address 118 VICTORY ROAD  
315

City  
SPRINGFIELD

State  
NJ

Zip Code  
07081-1373

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 21 / 2016

Transaction ID : SA17.302692

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SUWANKOSAI, PUANGSRI, , ,**

Mailing Address 118 VICTORY ROAD  
315

City  
SPRINGFIELD

State  
NJ

Zip Code  
07081-1373

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

Transaction ID : SA17.303038

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

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

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

FOR LINE NUMBER: PAGE 315 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SUWANKOSAI, PUANGSRI, , ,</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 18 / 2016</div> </div> </p>	
<p>Mailing Address 118 VICTORY ROAD 315</p>			<p><b>Transaction ID : SA17.303072</b></p>	
<p>City SPRINGFIELD</p>	<p>State NJ</p>	<p>Zip Code 07081-1373</p>	<p>Amount of Each Receipt this Period  <div> <div>25.00</div> </div> </p>	
<p>FEC ID number of contributing federal political committee. C</p>			<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>	
<p>Name of Employer (for Individual) RETIRED</p>		<p>Occupation (for Individual) RETIRED</p>	<p>NON CONTRIBUTION ACCOUNT</p>	
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼  <div> <div>208.00</div> </div> </p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SUWANKOSAI, PUANGSRI, , ,</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 18 / 2016</div> </div> </p>	
<p>Mailing Address 118 VICTORY ROAD 315</p>			<p><b>Transaction ID : SA17.303073</b></p>	
<p>City SPRINGFIELD</p>	<p>State NJ</p>	<p>Zip Code 07081-1373</p>	<p>Amount of Each Receipt this Period  <div> <div>25.00</div> </div> </p>	
<p>FEC ID number of contributing federal political committee. C</p>			<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>	
<p>Name of Employer (for Individual) RETIRED</p>		<p>Occupation (for Individual) RETIRED</p>	<p>NON CONTRIBUTION ACCOUNT</p>	
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ </p>		<p>Aggregate Year-to-Date ▼  <div> <div>208.00</div> </div> </p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SUWANKOSAI, PUANGSRI, , ,</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 19 / 2016</div> </div> </p>	
<p>Mailing Address 118 VICTORY ROAD 315</p>			<p><b>Transaction ID : SA17.303171</b></p>	
<p>City SPRINGFIELD</p>	<p>State NJ</p>	<p>Zip Code 07081-1373</p>	<p>Amount of Each Receipt this Period  <div> <div>25.00</div> </div> </p>	
<p>FEC ID number of contributing federal political committee. C</p>			<p><input type="checkbox"/> Memo Item CONTRIBUTION</p>	
<p>Name of Employer (for Individual) RETIRED</p>		<p>Occupation (for Individual) RETIRED</p>	<p>NON CONTRIBUTION ACCOUNT</p>	
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) </p>		<p>Aggregate Year-to-Date ▼  <div> <div>208.00</div> </div> </p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<div> <div>75.00</div> </div>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<div> <div></div> </div>	

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

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

FOR LINE NUMBER: PAGE 316 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SUWANKOSAI, PUANGSRI, , ,**

Mailing Address 118 VICTORY ROAD  
315

City  
SPRINGFIELD

State  
NJ

Zip Code  
07081-1373

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.304033**

Amount of Each Receipt this Period

18.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SUWANKOSAI, PUANGSRI, , ,**

Mailing Address 118 VICTORY ROAD  
315

City  
SPRINGFIELD

State  
NJ

Zip Code  
07081-1373

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.306558**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SUWANKOSAI, PUANGSRI, , ,**

Mailing Address 118 VICTORY ROAD  
315

City  
SPRINGFIELD

State  
NJ

Zip Code  
07081-1373

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.306814**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

58.00

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

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

FOR LINE NUMBER: PAGE 317 OF 389

(check only one)

<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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SWALLEN, THOMAS, , ,**

Mailing Address 1709 MUIRFIELD AVE., NW

City  
**CANTON**

State  
**OH**

Zip Code  
**44708-1961**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**WINDSOR MEDICAL CENTER, INC.**

Occupation (for Individual)  
**PRESIDENT/ADMINISTRATOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.303839**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SWANSON, RONALD, , ,**

Mailing Address 115 DURANGO TRL

City  
**GEORGETOWN**

State  
**TX**

Zip Code  
**78633-4875**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**450.00**

Date of Receipt

**05 / 06 / 2016**

**Transaction ID : SA17.293755**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SWANSON, RONALD, , ,**

Mailing Address 115 DURANGO TRL

City  
**GEORGETOWN**

State  
**TX**

Zip Code  
**78633-4875**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**450.00**

Date of Receipt

**05 / 13 / 2016**

**Transaction ID : SA17.295743**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**350.00**

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 318 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SWANSON, RONALD, , ,**

Mailing Address 115 DURANGO TRL

City  
 GEORGETOWN

State  
 TX

Zip Code  
 78633-4875

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.299929**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SWANSON, RONALD, , ,**

Mailing Address 115 DURANGO TRL

City  
 GEORGETOWN

State  
 TX

Zip Code  
 78633-4875

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**05** / **23** / **2016**

**Transaction ID : SA17.301796**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SWANSON, RONALD, , ,**

Mailing Address 115 DURANGO TRL

City  
 GEORGETOWN

State  
 TX

Zip Code  
 78633-4875

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.301834**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SWANSON, RONALD, , ,**

Mailing Address 115 DURANGO TRL

City  
GEORGETOWN

State  
TX

Zip Code  
78633-4875

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.304410**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SWANSON, RONALD, , ,**

Mailing Address 115 DURANGO TRL

City  
GEORGETOWN

State  
TX

Zip Code  
78633-4875

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**05** / **26** / **2016**

**Transaction ID : SA17.304441**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SWAYZE, JAY, , ,**

Mailing Address 5921 SKIMMER POINT BOULEVARD SOUTH

City  
GULFPORT

State  
FL

Zip Code  
33707-3937

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295704**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

350.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 320 OF 389  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. TASKER, BRENDA, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P O BOX 3339 City DULUTH State GA Zip Code 30096-0057 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 31 / 2016 <b>Transaction ID : SA17.305955</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. TATUM, JOHN, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3709 MAPLEWOOD AVE City DALLAS State TX Zip Code 75205-2826 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 26 / 2016 <b>Transaction ID : SA17.305957</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. THESING, ROGER, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 18 E 4TH STREET 1200 City CINCINNATI State OH Zip Code 45202-3720 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED 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 05 / 10 / 2016 <b>Transaction ID : SA17.300359</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		1750.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. THOMAS-JONES MD., BARBARA, , ,**

Mailing Address 15445 MEADOW WOOD DRIVE

City  
 WEST PALM BEACH

State  
 FL

Zip Code  
 33414-9008

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.302437**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. THORNE, JULIA, , ,**

Mailing Address 410 HOGAN CT

City  
 MUSCATINE

State  
 IA

Zip Code  
 52761-2739

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 CARVER PUMP COMPANY

Occupation (for Individual)  
 ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.297063**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. THORNTON, PAT, , ,**

Mailing Address 624 N. ARLINGTON HEIGHTS RD

City  
 ARLINGTON HEIGHTS

State  
 IL

Zip Code  
 60004-5662

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 PAT MOONEY, INC

Occupation (for Individual)  
 BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305504**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1250.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 322 OF 389

(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TIMMERMAN, LARRY, , ,**

Mailing Address **943 ORCHID POINT WAY**

City  
**VERO BEACH**

State  
**FL**

Zip Code  
**32963-9518**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.303841**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TOM, YOUNG, , ,**

Mailing Address **420 URBANO DRIVE**

City  
**SAN FRANCISCO**

State  
**CA**

Zip Code  
**94127-2827**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 26 / 2016**

**Transaction ID : SA17.305936**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TOPPINO, PAUL, , ,**

Mailing Address **1500 CATHERINE ST**

City  
**KEY WEST**

State  
**FL**

Zip Code  
**33040-3530**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**CT&S**

Occupation (for Individual)  
**CONTRACTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.302462**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**850.00**

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TOPPINO, PAUL, , ,**

Mailing Address 1500 CATHERINE ST

City  
KEY WEST

State  
FL

Zip Code  
33040-3530

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CT&S

Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **26** / **2016**

**Transaction ID : SA17.304584**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TOPPINO, PAUL, , ,**

Mailing Address 1500 CATHERINE ST

City  
KEY WEST

State  
FL

Zip Code  
33040-3530

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CT&S

Occupation (for Individual)  
CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.304605**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TRAN, NIKI, , ,**

Mailing Address 2108 E. HELENA DR.

City  
PHOENIX

State  
AZ

Zip Code  
85022-2239

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.296581**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00

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

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

FOR LINE NUMBER: PAGE 324 OF 389  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TRAN, NIKI, , ,**

Mailing Address 2108 E. HELENA DR.

City  
 PHOENIX

State  
 AZ

Zip Code  
 85022-2239

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.305429**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TUCKER, TERRY, , ,**

Mailing Address 1510 COUNTRY CLUB DR. E.

City  
 WARSAW

State  
 IN

Zip Code  
 46580-5013

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 MAPLE LEAF FARMS, INC.

Occupation (for Individual)  
 BUS. EXEC.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **20** / **2016**

**Transaction ID : SA17.302350**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TUMLIN, PATRICIA A, , ,**

Mailing Address 2660 MARLEIGH FARM RD.

City  
 KENNESAW

State  
 GA

Zip Code  
 30152-6520

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.306103**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1350.00

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

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TURNER, JOHN, , ,**

Mailing Address **4500 LORRAINE AVE**

City  
**DALLAS**

State  
**TX**

Zip Code  
**75205-3613**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA17.293976**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TURNER, SARAH, , ,**

Mailing Address **1964 OLD ROSE MILL ROAD**

City  
**ARRINGTON**

State  
**VA**

Zip Code  
**22922-2205**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 20 / 2016**

**Transaction ID : SA17.297171**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. TWISS, GRANT, , ,**

Mailing Address **1156 W 26TH ST**

City  
**ERIE**

State  
**PA**

Zip Code  
**16508-1518**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF EMPLOYED**

Occupation (for Individual)  
**TAX ACCOUNTANT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.306452**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

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for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TYLER, THOMAS, , ,**

Mailing Address **2202 CASEY KEY RD**

City  
**NOKOMIS**

State  
**FL**

Zip Code  
**34275-3321**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.307064**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. VALENTINE, DONALD, , ,**

Mailing Address **703 ANGLERS POND**

City

**STEAMBOAT SPRINGS**

State

**CO**

Zip Code

**80487-8827**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**MINER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.305961**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. VASS, PHIL, , ,**

Mailing Address **3190 PERKINS AVE**

City

**VENTURA**

State

**CA**

Zip Code

**93003-7204**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**LAND ROVER JAGUAR VENTURA**

Occupation (for Individual)  
**AUTO DEALER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 25 / 2016**

**Transaction ID : SA17.305511**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**3000.00**

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

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

FOR LINE NUMBER: PAGE 327 OF 389

(check only one)

<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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. VERFAILLIE, HENDRIK, , ,**

Mailing Address 1420 NIGHTHAWK PT

City  
**NAPLES**

State  
**FL**

Zip Code  
**34105-2789**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**05 / 14 / 2016**

**Transaction ID : SA17.295854**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. VIEIRA, PATRICIA, , ,**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.296073**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. VIGLIONE, STANLEY, , ,**

Mailing Address 1387 WAKESHIRE TERRACE

City  
**BALLWIN**

State  
**MO**

Zip Code  
**63011-2958**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.304940**

Amount of Each Receipt this Period

**50.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**800.00**

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

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

FOR LINE NUMBER: PAGE 328 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. VIGLIONE, STANLEY, , ,**

Mailing Address 1387 WAKESHIRE TERRACE

City  
BALLWIN

State  
MO

Zip Code  
63011-2958

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.305108**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. VITALE, ALBERTO, , ,**

Mailing Address 135 GRACE TRAIL

City

PALM BEACH

State

FL

Zip Code

33480-3909

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.300192**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. VON DER HOFEN, HANS, , ,**

Mailing Address 18008 59TH DR. NE

City

ARLINGTON

State

WA

Zip Code

98223-8770

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
PILOT & RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **18** / **2016**

**Transaction ID : SA17.296610**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00



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

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

FOR LINE NUMBER: PAGE 329 OF 389

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<b>A. WAGONER, JEAN, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 116 FAIRVIEW AVE N 319 City SEATTLE State WA Zip Code 98109-5360 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 07 / 2016 <b>Transaction ID : SA17.293758</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>B. WAGONER, JEAN, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 116 FAIRVIEW AVE N 319 City SEATTLE State WA Zip Code 98109-5360 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 <b>Transaction ID : SA17.304629</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>C. WALKER, RICHARD W, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1055 CALIFORNIA ST City SAN FRANCISCO State CA Zip Code 94108-2203 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2016 <b>Transaction ID : SA17.296949</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item CONTRIBUTION NON CONTRIBUTION ACCOUNT
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		2000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 330 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. WALLACE, ROGER, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 24 / 2016</div> </div>	
Mailing Address 1913 SUMMER PINE COURT UNIT101			Transaction ID : <b>SA17.305485</b>	
City LAS VEGAS	State NV	Zip Code 89134-2519	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) ST VINCENT HEALTHCARE, BILLINGS		Occupation (for Individual) PHYSICIAN	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. WALLACE, SHIRLEY, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 18 / 2016</div> </div>	
Mailing Address 803 WALNUT AVE.			Transaction ID : <b>SA17.302323</b>	
City PEN ARGYL	State PA	Zip Code 18072-1276	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. WALLSCHLAEGER, MARK, , ,</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 31 / 2016</div> </div>	
Mailing Address 107 DONLON DRIVE			Transaction ID : <b>SA17.304617</b>	
City NEW SMYRNA BEACH	State FL	Zip Code 32168-7778	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. <div>C</div>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) HACIENDA DEVELOPMENT CORP		Occupation (for Individual) OWNER	NON CONTRIBUTION ACCOUNT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 331 OF 389  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WANG, LILY, , ,**

Mailing Address **7946 4TH ST.**

City  
**DOWNEY**

State  
**CA**

Zip Code  
**90241-3237**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**KOTAI REALTY ,INC.**

Occupation (for Individual)  
**REALTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 10 / 2016**

**Transaction ID : SA17.300080**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WARD, ELAINE, , ,**

Mailing Address **945 S. ORANGE GROVE D**

City  
**PASADENA**

State  
**CA**

Zip Code  
**91105-1793**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 21 / 2016**

**Transaction ID : SA17.308747**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. WARDLAY, BRUCE, , ,**

Mailing Address **8315 INWOOD RD**

City  
**DALLAS**

State  
**TX**

Zip Code  
**75209-3341**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**MEDICAL DOCTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.303606**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**

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

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

FOR LINE NUMBER: PAGE 332 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WATERS, JULIE, , ,**

Mailing Address **204 PALMETTO ROAD**

City  
**BELLEAIR**

State  
**FL**

Zip Code  
**33756-1430**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**ATTORNEY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295339**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WATKINS, LINDA, , ,**

Mailing Address **934 POP NOAH RD.**

City  
**COLLINSVILLE**

State  
**TX**

Zip Code  
**76233-3328**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**ANNOUNCER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295163**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. WATT, DIANE, , ,**

Mailing Address **212 ASHLEY 440 ROAD**

City  
**CROSSETT**

State  
**AR**

Zip Code  
**71635-**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 12 / 2016**

**Transaction ID : SA17.295323**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1000.00**

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

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

FOR LINE NUMBER: PAGE 333 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WEATHERFORD, MORRETA, , ,**

Mailing Address 4704 BARKRIDGE TRAIL

City  
**FORT WORTH**

State  
**TX**

Zip Code  
**76109-3210**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**DEBLOCK, LTD.**

Occupation (for Individual)  
**FAMILY OWNED COMPANY BUSINES**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 24 / 2016**

**Transaction ID : SA17.307048**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WEBER, JOSEPH, , ,**

Mailing Address 315 W JENNINGS ST.

City  
**NEW LONDON**

State  
**WI**

Zip Code  
**54961-2047**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 18 / 2016**

**Transaction ID : SA17.296541**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. WEBER, JOSEPH, , ,**

Mailing Address 315 W JENNINGS ST.

City  
**NEW LONDON**

State  
**WI**

Zip Code  
**54961-2047**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**05 / 11 / 2016**

**Transaction ID : SA17.309065**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**450.00**

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

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

FOR LINE NUMBER: PAGE 334 OF 389

(check only one)

<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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. **WEDEKIND, LARRY, , ,**

Mailing Address 19207 CLEAR SKYY DRIVE

City  
**HUMBLE**

State  
**TX**

Zip Code  
**77346-1664**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
**INTEGRANET HEALTH**

Occupation (for Individual)  
**HEALTHCARE ADMIN**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **19** / **2016**

Transaction ID : **SA17.302342**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **WELDON, HURSELL B, , ,**

Mailing Address 1120 ARNOLD AVE

City  
**LOMPOC**

State  
**CA**

Zip Code  
**93436-3228**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**05** / **17** / **2016**

Transaction ID : **SA17.301860**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **WENNERMARK, CHARLES, , ,**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Occupation (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **12** / **2016**

Transaction ID : **SA17.295949**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

850.00

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

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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. WHEAT, JAMES, , ,</b></p> <p>Mailing Address 10001 PATTERSON AVE SUITE 100</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City RICHMOND</td> <td style="width: 16%;">State VA</td> <td style="width: 51%;">Zip Code 23238-5126</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) BLANDFIELD ASSOC</td> <td style="width: 67%;">Occupation (for Individual) INVESTMENTS</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span> </p>			City RICHMOND	State VA	Zip Code 23238-5126	Name of Employer (for Individual) BLANDFIELD ASSOC	Occupation (for Individual) INVESTMENTS	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>  05 / 31 / 2016         </p> <p><b>Transaction ID : SA17.305962</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span> </p> <p><input type="checkbox"/> Memo Item CONTRIBUTION</p> <p>NON CONTRIBUTION ACCOUNT</p>	
City RICHMOND	State VA	Zip Code 23238-5126							
Name of Employer (for Individual) BLANDFIELD ASSOC	Occupation (for Individual) INVESTMENTS								
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. WHEELER, THOMAS, , ,</b></p> <p>Mailing Address 1221 GULF SHORE BLVD,N #502</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City NAPLES</td> <td style="width: 16%;">State FL</td> <td style="width: 51%;">Zip Code 34102-4922</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) RETIRED</td> <td style="width: 67%;">Occupation (for Individual) RETIRED</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span> </p>			City NAPLES	State FL	Zip Code 34102-4922	Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>  05 / 09 / 2016         </p> <p><b>Transaction ID : SA17.299303</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span> </p> <p><input type="checkbox"/> Memo Item CONTRIBUTION</p> <p>NON CONTRIBUTION ACCOUNT</p>	
City NAPLES	State FL	Zip Code 34102-4922							
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED								
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. WHEELER, THOMAS, , ,</b></p> <p>Mailing Address 1221 GULF SHORE BLVD,N #502</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City NAPLES</td> <td style="width: 16%;">State FL</td> <td style="width: 51%;">Zip Code 34102-4922</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) RETIRED</td> <td style="width: 67%;">Occupation (for Individual) RETIRED</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span> </p>			City NAPLES	State FL	Zip Code 34102-4922	Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>  05 / 16 / 2016         </p> <p><b>Transaction ID : SA17.300191</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span> </p> <p><input type="checkbox"/> Memo Item CONTRIBUTION</p> <p>NON CONTRIBUTION ACCOUNT</p>	
City NAPLES	State FL	Zip Code 34102-4922							
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">2000.00</span>						
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>						

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WHITE, WALTER, , ,**

Mailing Address 11523 WENDOVER LANE

City  
HOUSTON

State  
TX

Zip Code  
77024-5222

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ECONOMY POLYMERS AND CHEMICALS

Occupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.303638**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WHORTON, MICHAEL, , ,**

Mailing Address 6903 PRESTON GLEN DR.

City  
DALLAS

State  
TX

Zip Code  
75230-2362

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **13** / **2016**

**Transaction ID : SA17.295658**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. WICHMAN, MICHAEL, , ,**

Mailing Address 208 E 5TH ST

City  
ATKINSON

State  
NE

Zip Code  
68713-4895

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.304631**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

6000.00



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILKERSON, ANALIA, , ,**

Mailing Address 1967 PEDEN

City  
HOUSTON

State  
TX

Zip Code  
77019-5341

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
HARRIS COUNTY TX

Occupation (for Individual)  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **31** / **2016**

**Transaction ID : SA17.307054**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILKINSON, TERRY, , ,**

Mailing Address 33863 STATE HWY 16

City  
WOODLAND

State  
CA

Zip Code  
95695-9350

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
WILKINSON INTERNATIONAL INC

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.307057**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, BARBARA, , ,**

Mailing Address 149 FOUR DIAMOND DT.

City  
SEVEN DEVILS

State  
NC

Zip Code  
28604-8991

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **17** / **2016**

**Transaction ID : SA17.296461**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WILLIAMS, CRAIG, , ,**

Mailing Address 8990 HEMPSTEAD RD

City  
**HOUSTON**

State  
**TX**

Zip Code  
**77008-6000**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**SELF**

Occupation (for Individual)  
**SELF**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 31 / 2016**

**Transaction ID : SA17.306327**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WILLIAMS, ROBERT, , ,**

Mailing Address 1979 HEIDELBERG DR.

City  
**MT PLEASANT**

State  
**SC**

Zip Code  
**29464-3967**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 15 / 2016**

**Transaction ID : SA17.297467**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. WILLMS, PHILLIP, , ,**

Mailing Address 616 ST JAMES RD

City  
**NEWPORT BEACH**

State  
**CA**

Zip Code  
**92663-5855**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**WET OKOLE HAWAII INC**

Occupation (for Individual)  
**BUS OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**05 / 23 / 2016**

**Transaction ID : SA17.302477**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
**CONTRIBUTION**

**NON CONTRIBUTION ACCOUNT**

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**1250.00**

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. WINTERLING, JOHN, , ,</b></p> <p>Mailing Address <b>5470 ROBIN CIR</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 21 / 2016</div> </div> </p> <p><b>Transaction ID : SA17.308698</b></p>	
<p>City <b>YORBA LINDA</b></p>	<p>State <b>CA</b></p>	<p>Zip Code <b>92886-4932</b></p>	<p>Amount of Each Receipt this Period  <div> <div></div> <div>500.00</div> </div> </p>	
<p>FEC ID number of contributing federal political committee. <b>C</b></p>			<p><input type="checkbox"/> Memo Item <b>CONTRIBUTION</b></p>	
<p>Name of Employer (for Individual) <b>TOYOTA OF RIVERSIDE</b></p>		<p>Occupation (for Individual) <b>SALES</b></p>	<p><b>NON CONTRIBUTION ACCOUNT</b></p>	
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p>		<p>Aggregate Year-to-Date ▼  <div> <div></div> <div>500.00</div> </div> </p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. WISNER, LESLIE, , ,</b></p> <p>Mailing Address <b>1017</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 15 / 2016</div> </div> </p> <p><b>Transaction ID : SA17.296262</b></p>	
<p>City <b>ADA</b></p>	<p>State <b>MI</b></p>	<p>Zip Code <b>49301-</b></p>	<p>Amount of Each Receipt this Period  <div> <div></div> <div>250.00</div> </div> </p>	
<p>FEC ID number of contributing federal political committee. <b>C</b></p>			<p><input type="checkbox"/> Memo Item <b>CONTRIBUTION</b></p>	
<p>Name of Employer (for Individual) <b>LET INC.</b></p>		<p>Occupation (for Individual) <b>LAND DEVELOPER</b></p>	<p><b>NON CONTRIBUTION ACCOUNT</b></p>	
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p>		<p>Aggregate Year-to-Date ▼  <div> <div></div> <div>250.00</div> </div> </p>		
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. WOODRUFF, ANTHONY, , ,</b></p> <p>Mailing Address <b>320 PALMETTO POINT</b></p>			<p>Date of Receipt  <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 18 / 2016</div> </div> </p> <p><b>Transaction ID : SA17.296540</b></p>	
<p>City <b>VERO BEACH</b></p>	<p>State <b>FL</b></p>	<p>Zip Code <b>32963-3356</b></p>	<p>Amount of Each Receipt this Period  <div> <div></div> <div>250.00</div> </div> </p>	
<p>FEC ID number of contributing federal political committee. <b>C</b></p>			<p><input type="checkbox"/> Memo Item <b>CONTRIBUTION</b></p>	
<p>Name of Employer (for Individual) <b>RETIRED</b></p>		<p>Occupation (for Individual) <b>RETIRED</b></p>	<p><b>NON CONTRIBUTION ACCOUNT</b></p>	
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)         </p>		<p>Aggregate Year-to-Date ▼  <div> <div></div> <div>250.00</div> </div> </p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....▶</p>			<div> <div></div> <div>1000.00</div> </div>	
<p><b>TOTAL</b> This Period (last page this line number only).....▶</p>			<div> <div></div> <div></div> </div>	

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. WOOLLEY, ELLIOTT, , ,**

Mailing Address 1656 BAHIA VISTA WAY

City  
 LA JOLLA

State  
 CA

Zip Code  
 92037-7852

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **25** / **2016**

**Transaction ID : SA17.304612**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. WRIGHT, LANCE, , ,**

Mailing Address 11014 WICKWOOD DRIVE

City  
 HOUSTON

State  
 TX

Zip Code  
 77024-7521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 CASTLEROCK

Occupation (for Individual)  
 HOMEBUILDER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.300082**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. YEARGAN, JAMES, , ,**

Mailing Address 5099 RIVERVIEW RD

City  
 ATLANTA

State  
 GA

Zip Code  
 30327-4237

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
 RETIRED

Occupation (for Individual)  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.305107**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

750.00

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

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NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. YOCKEY, JOHN GEORGE, , ,**

Mailing Address **N43 W32907 RASMUS RD. #D**

City  
**NASHOTAH**

State  
**WI**

Zip Code  
**53058-9460**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ARCHDIOCESE OF MILWAUKEE**

Occupation (for Individual)  
**R. CATHOLIC PRIEST**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 15 / 2016**

**Transaction ID : SA17.296350**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. YOUNG, EMERSON R, , ,**

Mailing Address **294N 44000E**

City  
**RIGBY**

State  
**ID**

Zip Code  
**83442-**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**RETIRED**

Occupation (for Individual)  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 19 / 2016**

**Transaction ID : SA17.296823**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. YOUNGS, THOMAS, , ,**

Mailing Address **P.O. BOX 188**

City  
**ZELLWOOD**

State  
**FL**

Zip Code  
**32798-0188**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**ZELLWIN FARMS CO.**

Occupation (for Individual)  
**AGRICULTURE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**05 / 16 / 2016**

**Transaction ID : SA17.300083**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

**750.00**

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

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

FOR LINE NUMBER: PAGE 342 OF 389

(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ZAVIALOV, ILIA, , ,**

Mailing Address 12815 SE RIVERCREST DR.

City  
VANCOUVER

State  
WA

Zip Code  
98683-6623

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
NOVA TECHNOLOGIES, INC.

Occupation (for Individual)  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**05** / **16** / **2016**

**Transaction ID : SA17.296383**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ZINN, STEVEN, , ,**

Mailing Address 20 NOB HILL CIRCLE

City  
WEST LAKE HILLS

State  
TX

Zip Code  
78746-3650

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CAPITOL ANESTHESIOLOGY ASSOC

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **27** / **2016**

**Transaction ID : SA17.305941**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ZINN, STEVEN, , ,**

Mailing Address 20 NOB HILL CIRCLE

City  
WEST LAKE HILLS

State  
TX

Zip Code  
78746-3650

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CAPITOL ANESTHESIOLOGY ASSOC

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**05** / **24** / **2016**

**Transaction ID : SA17.306986**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

NON CONTRIBUTION ACCOUNT

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00

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

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

FOR LINE NUMBER: PAGE 343 OF 389

(check only one)

<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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RAPID RESPONSE TELEVISION LLC**

Mailing Address 4850 WRIGHT ROAD

City  
STAFFORD

State  
TX

Zip Code  
77477

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

86683.00

Date of Receipt

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

Transaction ID : SA17.83885

Amount of Each Receipt this Period

50000.00

☐ Memo Item

IN-KIND - CAREY CONTRIBUTION OF TELEVISI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RAPID RESPONSE TELEVISION LLC**

Mailing Address 4850 WRIGHT ROAD

City  
STAFFORD

State  
TX

Zip Code  
77477

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

86683.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2016

Transaction ID : SA17.84718

Amount of Each Receipt this Period

33000.00

☐ Memo Item

CAREY ACCOUNT - IN-KIND - COST OF TELEVI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

83000.00

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

486625.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 344 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. KREMER, AMY, , ,**

Mailing Address 4308 N. SMOKE RIDGE CT., NE

City  
ROSWELLState  
GAZip Code  
30075Purpose of Disbursement  
STAFF COMPENSATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.I8512!**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
CAREY ACCT: ACCIDENTAL OVER-PAYMENT, VENDOR CREDIT ISSUED

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2016

FEC Identification Number

**C****Transaction ID : SB21B.I8509c**

Amount of Each Disbursement this Period

15340.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DB CAPITOL STRATEGIES**Mailing Address 203 SOUTH UNION ST STE 300  
SUITE 300City  
ALEXANDRIAState  
VAZip Code  
22314-3356Purpose of Disbursement  
LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2016

FEC Identification Number

**C****Transaction ID : SB21B.I8512**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22340.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 345 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. DB CAPITOL STRATEGIES**Mailing Address 203 SOUTH UNION ST STE 300  
SUITE 300City  
ALEXANDRIAState  
VAZip Code  
22314-3356Purpose of Disbursement  
REIMBURSEMENT (SEE SCHEDULE E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8514

Amount of Each Disbursement this Period

2600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DB CAPITOL STRATEGIES**Mailing Address 203 SOUTH UNION ST STE 300  
SUITE 300City  
ALEXANDRIAState  
VAZip Code  
22314-3356Purpose of Disbursement  
REIMBURSEMENT (SEE BELOW)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.I85157

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**Mailing Address 1593 SPRING HILL RD  
SUITE 400City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
COMPLIANCE SOFTWARE FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.I8526

Amount of Each Disbursement this Period

1500.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4100.00
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 346 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. DB CAPITOL STRATEGIES**Mailing Address 203 SOUTH UNION ST STE 300  
SUITE 300City  
ALEXANDRIAState  
VAZip Code  
22314-3356Purpose of Disbursement  
LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2016

FEC Identification Number

**C** 

Transaction ID : SB21B.I9146

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMANDVOICE, LLC**Mailing Address 11555 MEDLOCK BRIDGE RD.  
SUITE 100City  
JOHNS CREEKState  
GAZip Code  
30097Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2016

FEC Identification Number

**C** 

Transaction ID : SB21B.I85117

Amount of Each Disbursement this Period

 936.71☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONOR BUREAU**

Mailing Address 1900 N CULPEPER ST

City  
ARLINGTONState  
VAZip Code  
22207Purpose of Disbursement  
LIST DATA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Transaction ID : SB21B.I8512

Amount of Each Disbursement this Period

 4468.81☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 5905.52

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 347 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 306City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2016

FEC Identification Number

**C****Transaction ID : SB21B.I8509!**

Amount of Each Disbursement this Period

4053.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELAVON INC.**Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2016

FEC Identification Number

**C****Transaction ID : SB21B.I8512c**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELAVON INC.**Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2016

FEC Identification Number

**C****Transaction ID : SB21B.I8512**

Amount of Each Disbursement this Period

10521.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14674.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 348 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.I8512

Amount of Each Disbursement this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELAVON INC.**Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8512

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELAVON INC.**Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8513

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

650.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 349 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I8513'

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELAVON INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I85132

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELAVON INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2016

Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I8513

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 350 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB21B.I8513

Amount of Each Disbursement this Period

195.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELAVON INC.**Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB21B.I8513

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 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB21B.I8513

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

345.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 351 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8513i

Amount of Each Disbursement this Period

105.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELAVON INC.**Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8513i

Amount of Each Disbursement this Period

140.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELAVON INC.**Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8513i

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

745.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 352 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8514I

Amount of Each Disbursement this Period

0.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELAVON INC.**Mailing Address TWO CONCOURSE PARKWAY  
SUITE 800City  
ATLANTAState  
GAZip Code  
30328Purpose of Disbursement  
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8514I

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INFOCISION MANAGEMENT CORPORATION**

Mailing Address 325 SPRINGSIDE DR

City  
AKRONState  
OHZip Code  
44333Purpose of Disbursement  
INBOUND PHONE SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.I8512

Amount of Each Disbursement this Period

2850.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2876.22



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 353 OF 389

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. PARK AVENUE ASSETS, LLC**Mailing Address 1173A 2ND AVE  
#381City  
NEW YORKState  
NYZip Code  
10065Purpose of Disbursement  
FUNDRAISING CONSULTING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8515'

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SAME DAY PROCESSING**Mailing Address 7300 HUDSON BLVD N  
STE 240City  
ST. PAULState  
MNZip Code  
55128Purpose of Disbursement  
CAGING AND PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : SB21B.I85118

Amount of Each Disbursement this Period

6494.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE PASS GROUP, LLC**

Mailing Address 2016 STONEHURST DRIVE

City  
NASHVILLEState  
TNZip Code  
37215Purpose of Disbursement  
FUNDRAISING CONSULTING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		11		2016

FEC Identification Number

**C**

Transaction ID : SB21B.I8512

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

13994.95

65706.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 354 OF 389

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. CAMPAIGN SOLUTIONS**

Mailing Address 117 N. SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
CAREY ACCT: DIGITAL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	6		

FEC Identification Number

**C** 

Transaction ID : SB29.I85097

Amount of Each Disbursement this Period

 6943.70☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONNELL DONATELLI, INC**Mailing Address 1415 L ST  
#430City  
SACRAMENTOState  
CAZip Code  
95814Purpose of Disbursement  
CAREY ACCT: DATA SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	1	6		

FEC Identification Number

**C** 

Transaction ID : SB29.I85150

Amount of Each Disbursement this Period

 8207.99☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DB CAPITOL STRATEGIES**Mailing Address 203 SOUTH UNION ST STE 300  
SUITE 300City  
ALEXANDRIAState  
VAZip Code  
22314-3356Purpose of Disbursement  
CAREY ACCT: REIMBURSEMENT (SEE SCHEDULE E)

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	4			2	0	1	6		

FEC Identification Number

**C** 

Transaction ID : SB29.I85113

Amount of Each Disbursement this Period

 1000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 16151.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 355 OF 389

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. EDONATION**

Mailing Address 117 NORTH SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
CAREY ACCT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	6		

FEC Identification Number

**C** 

Transaction ID : SB29.I85091

Amount of Each Disbursement this Period

 389.14☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EDONATION**

Mailing Address 117 NORTH SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
CAREY ACCT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	6			2	0	1	6		

FEC Identification Number

**C** 

Transaction ID : SB29.I85092

Amount of Each Disbursement this Period

 1830.23☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EDONATION**

Mailing Address 117 NORTH SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
CAREY ACCT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	6		

FEC Identification Number

**C** 

Transaction ID : SB29.I85093

Amount of Each Disbursement this Period

 5941.25☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 8160.62

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 356 OF 389

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. EDONATION**

Mailing Address 117 NORTH SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
CAREY ACCT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	6		

FEC Identification Number

C   
**Transaction ID : SB29.I85094**

Amount of Each Disbursement this Period

 8582.80☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRONT PORCH STRATEGIES**

Mailing Address PO BOX 314

City  
LEWIS CENTERState  
OHZip Code  
43035Purpose of Disbursement  
CAREY ACCT: CONFERENCE CALL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	6		

FEC Identification Number

C   
**Transaction ID : SB29.I85147**

Amount of Each Disbursement this Period

 372.40☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRONT PORCH STRATEGIES**

Mailing Address PO BOX 314

City  
LEWIS CENTERState  
OHZip Code  
43035Purpose of Disbursement  
CAREY ACCT: CONFERENCE CALL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	6		

FEC Identification Number

C   
**Transaction ID : SB29.I85148**

Amount of Each Disbursement this Period

 280.65☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 9235.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 357 OF 389

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. FRONT PORCH STRATEGIES**

Mailing Address PO BOX 314

City  
LEWIS CENTERState  
OHZip Code  
43035Purpose of Disbursement  
CAREY ACCT: CONFERENCE CALL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB29.I85149

Amount of Each Disbursement this Period

486.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INFOCISION MANAGEMENT CORPORATION**

Mailing Address 325 SPRINGSIDE DR

City  
AKRONState  
OHZip Code  
44333Purpose of Disbursement  
CAREY ACCT: INBOUND PHONE SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB29.I85116

Amount of Each Disbursement this Period

84.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POLITICAL LIST BROKERS LLC**Mailing Address 107 S WEST ST  
PMB 826City  
ALEXANDRIAState  
VAZip Code  
22314-2824Purpose of Disbursement  
CAREY ACCT: List Acquisition Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB29.I85146

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

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

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

10571.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 358 OF 389

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 500City  
GRAND RAPIDSState  
MIZip Code  
49503Purpose of Disbursement  
CAREY ACCT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	6		

FEC Identification Number

**C** 

Transaction ID : SB29.I85089

Amount of Each Disbursement this Period

 3502.15☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TRANSAXT**Mailing Address 190 MONROE AVENUE NW  
SUITE 500City  
GRAND RAPIDSState  
MIZip Code  
49503Purpose of Disbursement  
CAREY ACCT: PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	6		

FEC Identification Number

**C** 

Transaction ID : SB29.I85090

Amount of Each Disbursement this Period

 10492.59☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** 

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13994.74

58114.10

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 359 OF 389

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC.83960

GREAT AMERICA PAC

**LOAN SOURCE** Full Name (Last, First, Middle Initial)N ☐ Memo Item

Beach, Eric, , ,

Carey Acct: Loan

Mailing Address 344 E 16th Street

City

Costa Mesa

State

CA

ZIP Code

92627

Election:

☐ Primary☐ General☐ Other (specify) ▼

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
04 / 21 / 2016

Date Due

M M / D D / Y Y Y Y

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

PAGE 360 OF 389

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC.83191

GREAT AMERICA PAC

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
GOLDENWEST DIAMOND CORPORATIONN ☐ Memo Item

CAREY ACCOUNT LOAN

Mailing Address 15732 TUSTIN VILLAGE WAY

City

TUSTIN

State

CA

ZIP Code

92780-4924

Election:

☐ Primary☐ General☐ Other (specify) ▼

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
03 / 17 / 2016

Date Due

M M / D D / Y Y Y Y

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)..... ►

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 D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 361 OF 389

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ALLIANCE STRATEGIES GROUP, LLC**

Nature of Debt (Purpose):

**ONLINE VOTER CONTACT**

Mailing Address 7700 CONGRESS AVENUE, SUITE 3115

City

BOCA RATON

State

FL

Zip Code

33487

Outstanding Balance Beginning This Period

0.00

Transaction ID : **SD.85043**

Amount Incurred This Period

6895.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6895.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**BRILLIANT COMMUNICATIONS**

Nature of Debt (Purpose):

**PRODUCTION, DATA, AND CREATIVE SERVICES**

Mailing Address 9305 SCHUBERT CT

City

VIENNA

State

VA

Zip Code

22182

Outstanding Balance Beginning This Period

0.00

Transaction ID : **SD.85059**

Amount Incurred This Period

29120.62

Payment This Period

0.00

Outstanding Balance at Close of This Period

29120.62

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**

Nature of Debt (Purpose):

**CREATIVE AND DEPLOYMENT SERVICES**

Mailing Address 117 N. SAINT ASAPH ST

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : **SD.85060**

Amount Incurred This Period

2308.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

2308.01

1) **SUBTOTALS** This Period This Page (optional)..... ►

38323.63

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 362 OF 389

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**

Nature of Debt (Purpose):

CREATIVE AND DEPLOYMENT SERVICES

Mailing Address 117 N. SAINT ASAPH ST

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD.85054

Amount Incurred This Period

9613.46

Payment This Period

0.00

Outstanding Balance at Close of This Period

9613.46

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS**

Nature of Debt (Purpose):

LIST RENTAL COSTS

Mailing Address 117 N. SAINT ASAPH ST

City

Alexandria

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD.85055

Amount Incurred This Period

24506.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

24506.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**DB CAPITOL STRATEGIES**

Nature of Debt (Purpose):

COST OF ONLINE ADVERTISING - TO BE REIMB

Mailing Address 203 SOUTH UNION STREET  
SUITE 300

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

3600.00

Transaction ID : SD.201604001

Amount Incurred This Period

0.00

Payment This Period

3600.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

34120.21

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD.85054

All items reported as debts for this period are not, in fact, debts. These are amounts that were both invoiced in and paid in the month of June for Independent Expenditures made in May that were part of estimated IE reports and for which no actual balance was invoiced prior to close of books. The Committee does not agree that a debt can exist prior to it being invoiced for an actual amount that it does not know it owes. However, this Committee is reporting this activity in this bizarre manner which muddles the public record at the express direction of its FEC RAD analyst.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 364 OF 389

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**INFOCISION MANAGEMENT CORPORATION**

Nature of Debt (Purpose):

OUTBOUND VOTER CONTACT CALLS

Mailing Address 325 SPRINGSIDE DR

City  
AKRONState  
OHZip Code  
44333

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD.85051

Amount Incurred This Period

105148.15

Payment This Period

0.00

Outstanding Balance at Close of This Period

105148.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**MEDIA DC**

Nature of Debt (Purpose):

ONLINE VOTER CONTACT

Mailing Address 1150 17TH STREET, NW  
SUITE 505City  
WashingtonState  
DCZip Code  
20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD.85044

Amount Incurred This Period

3803.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3803.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NEWSMAX MEDIA, INC.**

Nature of Debt (Purpose):

ONLINE VOTER CONTACT

Mailing Address 750 PARK OF COMMERCE DRIVE  
SUITE 100City  
BOCA RATONState  
FLZip Code  
33487

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD.85049

Amount Incurred This Period

750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

750.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

109701.15

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 365 OF 389

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**OPINION STRATEGIES, LLC**

Nature of Debt (Purpose):

ONLINE VOTER CONTACT

Mailing Address 415 PASO CORTO DRIVE

City  
KEARNEYSVILLEState  
WVZip Code  
25430

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD.85050

Amount Incurred This Period

7435.69

Payment This Period

0.00

Outstanding Balance at Close of This Period

7435.69

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**POLITICAL LIST BROKERS LLC**

Nature of Debt (Purpose):

ONLINE VOTER CONTACT

Mailing Address 107 S WEST ST  
PMB 826City  
AlexandriaState  
VAZip Code  
22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD.83889

Amount Incurred This Period

24571.17

Payment This Period

0.00

Outstanding Balance at Close of This Period

24571.17

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**REVILY INC.**

Nature of Debt (Purpose):

OUTBOUND VOTER CONTACT CALLS

Mailing Address 3436 MILLER DR.

City  
ATLANTAState  
GAZip Code  
30341

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD.85158

Amount Incurred This Period

3416.32

Payment This Period

0.00

Outstanding Balance at Close of This Period

3416.32

1) **SUBTOTALS** This Period This Page (optional)..... ►

35423.18

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 366 OF 389

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**GREAT AMERICA PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE WASHINGTON TIMES**

Nature of Debt (Purpose):

**ONLINE VOTER CONTACT**

Mailing Address 3600 NEW YORK AVENUE NE

City  
WashingtonState  
DCZip Code  
20002

Outstanding Balance Beginning This Period

0.00

Transaction ID : **SD.85061**

Amount Incurred This Period

925.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

925.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

925.00

2) **TOTALS** This Period (last page this line number only)..... ►

218493.17

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

300000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

518493.17

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 367 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> C00608489 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>	

  

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>CAMPAIGN SOLUTIONS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Mailing Address    117 N. SAINT ASAPH ST			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9613.46</div>		
City ALEXANDRIA	State VA	Zip Code 22314	<b>Transaction ID : SE24.85054</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure CREATIVE AND DEPLOYMENT SERVICES		Category/ Type	<div style="border: 1px solid black; padding: 2px; width: 100px;"></div>		
Name of Federal Candidate: TRUMP, DONALD, J., ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought:    <input type="checkbox"/> House    District: _____  <input checked="" type="checkbox"/> President    <input type="checkbox"/> Senate    State: _____         </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">868470.59</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					

  

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>CAMPAIGN SOLUTIONS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Mailing Address    117 N. SAINT ASAPH ST			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">24506.75</div>		
City ALEXANDRIA	State VA	Zip Code 22314	<b>Transaction ID : SE24.85055</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 40%;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure LIST RENTAL COSTS		Category/ Type	<div style="border: 1px solid black; padding: 2px; width: 100px;"></div>		
Name of Federal Candidate: TRUMP, DONALD, J., ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought:    <input type="checkbox"/> House    District: _____  <input checked="" type="checkbox"/> President    <input type="checkbox"/> Senate    State: _____         </div> </div>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">868470.59</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) 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, , ,

Signature

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 368 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>OPINION STRATEGIES, LLC</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 06 / 2016		
Mailing Address 415 PASO CORTO DRIVE			Amount <span style="border: 1px solid black; padding: 2px;">7435.69</span>		
City KEARNEYSVILLE	State WV	Zip Code 25430	Transaction ID : <b>SE24.85050</b>		
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 02 / 2016		
Name of Federal Candidate: TRUMP, DONALD, J., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>ALLIANCE STRATEGIES GROUP, LLC</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 06 / 2016		
Mailing Address 7700 CONGRESS AVENUE, SUITE 3115			Amount <span style="border: 1px solid black; padding: 2px;">6895.00</span>		
City BOCA RATON	State FL	Zip Code 33487	Transaction ID : <b>SE24.85043</b>		
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2016		
Name of Federal Candidate: TRUMP, DONALD, J., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
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, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2016	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 369 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>MEDIA DC</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1150 17TH STREET, NW SUITE 505			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 06 / 2016		
City WASHINGTON, DC		State DC	Amount <span style="border: 1px solid black; padding: 2px;">3803.00</span>		
Purpose of Expenditure ONLINE VOTER CONTACT		Zip Code 20036		Transaction ID : <b>SE24.85044</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2016	
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>NEWSMAX MEDIA, INC.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 750 PARK OF COMMERCE DRIVE SUITE 100			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 06 / 2016		
City BOCA RATON		State FL	Amount <span style="border: 1px solid black; padding: 2px;">750.00</span>		
Purpose of Expenditure ONLINE VOTER CONTACT		Zip Code 33487		Transaction ID : <b>SE24.85049</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2016	
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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, , , Signature			[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 370 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00608489         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INFOCISION MANAGEMENT CORPORATION</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 13 / 2016	
Mailing Address    325 SPRINGSIDE DR				Amount <span style="border: 1px solid black; padding: 2px;">105148.15</span>	
City AKRON		State OH		Zip Code 44333	
Purpose of Expenditure OUTBOUND VOTER CONTACT CALLS				Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: TRUMP, DONALD, J., ,				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>POLITICAL LIST BROKERS LLC</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 06 / 2016	
Mailing Address    107 S WEST ST PMB 826				Amount <span style="border: 1px solid black; padding: 2px;">24571.17</span>	
City ALEXANDRIA		State VA		Zip Code 22314-2824	
Purpose of Expenditure ONLINE VOTER CONTACT				Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: TRUMP, DONALD, J., ,				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%; text-align: right;"> <span style="border: 1px solid black; padding: 2px;">0.00</span>  <span style="border: 1px solid black; padding: 2px;"> </span>  <span style="border: 1px solid black; padding: 2px;"> </span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , _____ Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2016	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 371 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00608489         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>BRILLIANT COMMUNICATIONS</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 9305 SCHUBERT CT			<input type="text"/> / <input type="text"/> / <input type="text"/>		
City VIENNA	State VA	Zip Code 22182	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">29120.62</div>		
Purpose of Expenditure PRODUCTION, DATA, AND CREATIVE SERVICES		Category/ Type <input type="text"/>	Transaction ID : <b>SE24.85059</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: TRUMP, DONALD, J, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">868470.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>CAMPAIGN SOLUTIONS</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 117 N. SAINT ASAPH ST			<input type="text"/> / <input type="text"/> / <input type="text"/>		
City ALEXANDRIA	State VA	Zip Code 22314	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2308.01</div>		
Purpose of Expenditure CREATIVE AND DEPLOYMENT SERVICES		Category/ Type <input type="text"/>	Transaction ID : <b>SE24.85060</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: TRUMP, DONALD, J, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">868470.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , , [Electronically Filed]

Signature \_\_\_\_\_ Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 372 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00608489         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          /    /    /       </div>	
Full Name of Payee <b>THE WASHINGTON TIMES</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          05    06    2016       </div>
Mailing Address    3600 NEW YORK AVENUE NE			Amount		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         925.00       </div>
City WASHINGTON	State DC	Zip Code 20002	<b>Transaction ID : SE24.85061</b> Date of Disbursement or Obligation		
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          06    08    2016       </div>		
Name of Federal Candidate: TRUMO, DONALD, J, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought:		<input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         868470.59       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►
Full Name of Payee <b>REVILY INC.</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          05    01    2016       </div>
Mailing Address    3436 MILLER DR.			Amount		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         12750.00       </div>
City ATLANTA	State GA	Zip Code 30341	<b>Transaction ID : SE24.83876</b> Date of Disbursement or Obligation		
Purpose of Expenditure ROBOCALLS - NATIONALLY DISTRIBUTED		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          05    02    2016       </div>		
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought:		<input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         801425.69       </div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ►    Convention
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         12750.00       </div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
<b>(a) TOTAL Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature			[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          06    08    2016       </div>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 373 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00608489       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>RAPID RESPONSE TELEVISION LLC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 09 / 2016         </div>	
Mailing Address <b>4850 WRIGHT ROAD</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           50000.00         </div>	
City <b>STAFFORD</b>	State <b>TX</b>	Zip Code <b>77477</b>	<b>Transaction ID : SE24.83205</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 05 / 2016         </div>	
Purpose of Expenditure <b>TELEVISION ADVERTISEMENT</b>			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           868470.59         </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>RAPID RESPONSE TELEVISION LLC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 09 / 2016         </div>	
Mailing Address <b>4850 WRIGHT ROAD</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           50000.00         </div>	
City <b>STAFFORD</b>	State <b>TX</b>	Zip Code <b>77477</b>	<b>Transaction ID : SE24.83884</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 05 / 2016         </div>	
Purpose of Expenditure <b>IN-KIND - TELEVISION ADVERTISEMENT</b>			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           868470.59         </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         100000.00       </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         100000.00       </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , , [Electronically Filed]  
 Signature Date 

M M / D D / Y Y Y Y Y Y  
 04 / 20 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 374 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00608489       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>CAMPAIGN SOLUTIONS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 10 / 2016         </div>	
Mailing Address <b>117 N. SAINT ASAPH ST</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           11420.00         </div>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314</b>	<b>Transaction ID : SE24.83941</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 10 / 2016         </div>
Purpose of Expenditure <b>BUMPER STICKER PRODUCTION AND INDIVIDUAL MAILING</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           868470.59         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>INFOCISION MANAGEMENT CORPORATION</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 01 / 2016         </div>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           15473.44         </div>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44333</b>	<b>Transaction ID : SE24.83980</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            05 / 12 / 2016         </div>
Purpose of Expenditure <b>OUTBOUND VOTER CONTACT CALLS</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           868470.59         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         26893.44       </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         26893.44       </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , , [Electronically Filed]

Signature \_\_\_\_\_ Date 

M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2016



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 376 OF 389  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee <b>INFOCISION MANAGEMENT CORPORATION</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Mailing Address <b>325 SPRINGSIDE DR</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15473.44</div>		
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44333</b>	Transaction ID : <b>SE24.83983</b>		
Purpose of Expenditure <b>OUTBOUND VOTER CONTACT CALLS</b>		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">868470.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>ACTIVE ENGAGEMENT LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Mailing Address <b>44804 RIVERSIDE PARKWAY SUITE 350</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11366.00</div>		
City <b>LANSDOWNE</b>	State <b>VA</b>	Zip Code <b>20176</b>	Transaction ID : <b>SE24.85036</b>		
Purpose of Expenditure <b>ONLINE VOTER CONTACT</b>		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">868470.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">26839.44</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
(a) TOTAL Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>LIVEINTENT, INC.</b>			<input type="checkbox"/> Memo Item		
Mailing Address 100 CHURCH STREET FLOOR 7			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 20 / 2016		
City NEW YORK		State NY	Zip Code 10007		
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Amount <span style="border: 1px solid black; padding: 2px;"> </span> 5000.00	
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 868470.59			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>NEWSMAX MEDIA, INC.</b>			<input type="checkbox"/> Memo Item		
Mailing Address 750 PARK OF COMMERCE DRIVE SUITE 100			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 06 / 2016		
City BOCA RATON		State FL	Zip Code 33487		
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Amount <span style="border: 1px solid black; padding: 2px;"> </span> 21649.50	
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 868470.59			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span> 26649.50		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
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, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 19 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>RAPID RESPONSE TELEVISION LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 23 / 2016		
Mailing Address 4850 WRIGHT ROAD			Amount <span style="border: 1px solid black; padding: 2px;">100000.00</span>		
City STAFFORD	State TX	Zip Code 77477	Transaction ID : <b>SE24.83206</b>		
Purpose of Expenditure TELEVISION ADVERTISEMENT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 19 / 2016		
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>TMA DIRECT</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 06 / 2016		
Mailing Address 2000 EDMUND HALLEY DR #250			Amount <span style="border: 1px solid black; padding: 2px;">5568.50</span>		
City RESTON	State VA	Zip Code 20191	Transaction ID : <b>SE24.85041</b>		
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 23 / 2016		
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">105568.50</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
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, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 19 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>WORLDNETDAILY</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 06 / 2016	
Mailing Address 2020 PENNSYLVANIA AVE NW			Amount <span style="border: 1px solid black; padding: 2px;">2000.00</span>	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : <b>SE24.85042</b>	
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 23 / 2016	
Name of Federal Candidate: TRUMP, DONALD, J., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>MUSTARD SEED INTERACTIVE, LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 06 / 2016	
Mailing Address 435 EAST MAIN STREET SUITE 250			Amount <span style="border: 1px solid black; padding: 2px;">2202.00</span>	
City GREENWOOD	State IN	Zip Code 46143	Transaction ID : <b>SE24.85038</b>	
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 24 / 2016	
Name of Federal Candidate: TRUMP, DONALD, J., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">4202.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>	
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>	
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, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2016	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00608489         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>OPINION STRATEGIES, LLC</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address <b>415 PASO CORTO DRIVE</b>			Amount <input type="text"/>		
City <b>KEARNEYSVILLE</b>	State <b>WV</b>	Zip Code <b>25430</b>	Transaction ID : <b>SE24.85040</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure <b>ONLINE VOTER CONTACT</b>		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>868470.59</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>GRAVIS MARKETING</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address <b>910 BELLE AVE</b> <b>#1180</b>			Amount <input type="text"/>		
City <b>WINTER SPRINGS</b>	State <b>FL</b>	Zip Code <b>32708</b>	Transaction ID : <b>SE24.84717</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure <b>OUTBOUND VOTER CONTACT CALLS</b>		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>868470.59</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<input type="text"/> <b>15421.58</b>		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<input type="text"/>		
<b>(a) TOTAL Independent Expenditures .....</b>			<input type="text"/>		
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, , , Signature			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>LIVEINTENT, INC.</b>			<input type="checkbox"/> Memo Item		
Mailing Address 100 CHURCH STREET FLOOR 7			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 26 / 2016		
City NEW YORK		State NY	Zip Code 10007		Amount <span style="border: 1px solid black; padding: 2px;">20000.00</span>
Purpose of Expenditure OUTBOUND VOTER CONTACT CALLS			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>SE24.84725</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 25 / 2016
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>NEWSMAX MEDIA, INC.</b>			<input type="checkbox"/> Memo Item		
Mailing Address 750 PARK OF COMMERCE DRIVE SUITE 100			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 06 / 2016		
City BOCA RATON		State FL	Zip Code 33487		Amount <span style="border: 1px solid black; padding: 2px;">20304.00</span>
Purpose of Expenditure ONLINE VOTER CONTACT			Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>SE24.85048</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 25 / 2016
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;">40304.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....					<span style="border: 1px solid black; padding: 2px;"></span>
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, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 26 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00608489         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>RAPID RESPONSE TELEVISION LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address    4850 WRIGHT ROAD			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">33000.00</div>		
City STAFFORD	State TX	Zip Code 77477	<b>Transaction ID : SE24.84719</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure IN-KIND - TELEVISION ADVERTISEMENT		Category/ Type	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">868470.59</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		
Full Name of Payee <input type="checkbox"/> Memo Item <b>ACTIVE ENGAGEMENT LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address    44804 RIVERSIDE PARKWAY SUITE 350			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7600.50</div>		
City LANSDOWNE	State VA	Zip Code 20176	<b>Transaction ID : SE24.85045</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure ONLINE VOTER CONTACT		Category/ Type	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">868470.59</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">40600.50</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature			Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
[Electronically Filed]			05    26    2016		





**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>MEDIA BRIDGE, LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 9064 COURTHOUSE ROAD SUITE 101			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 06 / 2016		
City SPOTSYLVANIA		State VA	Zip Code 22553	Amount <span style="border: 1px solid black; padding: 2px;">1365.00</span>	
Purpose of Expenditure ONLINE VOTER CONTACT			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>SE24.85037</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 26 / 2016	
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>RAPID RESPONSE TELEVISION LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 4850 WRIGHT ROAD			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 30 / 2016		
City STAFFORD		State TX	Zip Code 77477	Amount <span style="border: 1px solid black; padding: 2px;">30000.00</span>	
Purpose of Expenditure TELEVISION ADVERTISEMENT			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>SE24.83207</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 26 / 2016	
Name of Federal Candidate: TRUMP, DONALD, J., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">31365.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"> </span>	
(a) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"> </span>	
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, , , Signature			[Electronically Filed]	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 06 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>REVILY INC.</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>3436 MILLER DR.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 13 / 2016		
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30341</b>	Amount <span style="border: 1px solid black; padding: 2px;">5211.22</span>		
Purpose of Expenditure <b>OUTBOUND VOTER CONTACT CALLS</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>SE24.83984</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 26 / 2016		
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>REVILY INC.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address <b>3436 MILLER DR.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 26 / 2016		
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30341</b>	Amount <span style="border: 1px solid black; padding: 2px;">3416.32</span>		
Purpose of Expenditure <b>OUTBOUND VOTER CONTACT CALLS</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Transaction ID : <b>SE24.85158</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 13 / 2016		
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">868470.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">5211.22</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 13 / 2016	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00608489</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>CAMPAIGN SOLUTIONS</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		
Mailing Address <b>117 N. SAINT ASAPH ST</b>			<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65338.00</div>		
Purpose of Expenditure <b>CREATIVE AND DEPLOYMENT SERVICES</b>		Category/Type	Transaction ID : <b>SE24.83926</b> Date of Disbursement or Obligation		
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>CAMPAIGN SOLUTIONS</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		
Mailing Address <b>117 N. SAINT ASAPH ST</b>			<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">144610.76</div>		
Purpose of Expenditure <b>LIST RENTAL COSTS</b>		Category/Type	Transaction ID : <b>SE24.83927</b> Date of Disbursement or Obligation		
Name of Federal Candidate: <b>TRUMP, DONALD, J., ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">209948.76</div>		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00608489       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>GOOGLE INC.</b> SEE REIMBURSEMENT INFO IN SCHEDULE B			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  04 / 19 / 2016 </div>		
Mailing Address 1600 AMPHITHEATRE PKWY DEPARTMENT NO 33654			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2600.00 </div>		
City MOUNTAIN VIEW	State CA	Zip Code 94043	<b>Transaction ID : SE24.85145</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  05 / 06 / 2016 </div>		
Purpose of Expenditure ONLINE ADVERTISING			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: TRUMP, DONALD, J, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 801425.69 </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Convention		

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>GOOGLE INC.</b> SEE REIMBURSEMENT INFO IN SCHEDULE B			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  04 / 19 / 2016 </div>		
Mailing Address 1600 AMPHITHEATRE PKWY DEPARTMENT NO 33654			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 500.00 </div>		
City MOUNTAIN VIEW	State CA	Zip Code 94043	<b>Transaction ID : SE24.85115</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  05 / 24 / 2016 </div>		
Purpose of Expenditure ONLINE ADVERTISING			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: TRUMP, DONALD, J, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 801425.69 </div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ► Convention		

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">   </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 877530.59 </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , , [Electronically Filed]  
 Signature Date MM / DD / YYYY