24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
GREAT AMERICA PÁC		
	C C00608489	
Check if 24-hour report X 48-hour report New report Amends report filed on		
Full Name of Payee	Date of Public Distribution/Dissemination	
GRAVIS MARKETING	M M / D D / Y Y Y Y	
Mailing Address 910 BELLE AVE	05 25 2016	
#1180	Amount	
City State Zip Code	5000.00	
WINTER SPRINGS FL 32708	Transaction ID : SE24.84717 Date of Disbursement or Obligation	
Purpose of Expenditure OUTBOUND VOTER CONTACT CALLS Category/ Type	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support Office	e Sought: House District:	
DONALD J. TRUMP Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary ⊠ General Other (specify) ▶	
Full Name of Payee GRAVIS MARKETING	Date of Public Distribution/Dissemination 05 26 2016	
Mailing Address 910 BELLE AVE	2010	
#1180	Amount	
City State Zip Code	5000.00	
WINTER SPRINGS FL 32708	Transaction ID : SE24.84724 Date of Disbursement or Obligation	
Purpose of Expenditure OUTBOUND VOTER CONTACT CALLS Category/ Type	05 26 / Y Y Y Y Y	
Name of Federal Candidate Support Office	e Sought: House District:	
DONALD LITPLIMB	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary X General Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
	7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Dan Backer [Electronically Filed] Date 0	M / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature Date Date	20 2010	

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

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
GREAT AMERICA PAC	C C00608489
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee LIVEINTENT, INC.	Date of Public Distribution/Dissemination
Mailing Address 100 CHURCH STREET	05 26 2016
FLOOR 7	Amount
City State Zip Code	20000.00
NEW YORK NY 10007	Transaction ID : SE24.84725 Date of Disbursement or Obligation
Purpose of Expenditure OUTBOUND VOTER CONTACT CALLS Category/ Type	05 / 25 / 2016
	e Sought: House District:
DONALD J. TRUMP Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
. S. Elosion for Smoo Godgin	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	20000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	30000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	26 2016
Signature	