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

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼		
GREAT AMERICA PAC		C C00608489
Check if 24-hour report		
Full Name of Payee CONNELL DONATELLI, INC.		Date of Public Distribution/Dissemination
SEE ESTIMATE TRANSACTION ID# SE24.149571		01 04 2019
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount
City State	Zip Code	10000.00
ALEXANDRIA VA	22314	Transaction ID : SE24.149589 Date of Disbursement or Obligation
Purpose of Expenditure ONLINE VOTER CONTACT	Category/ Type	01 03 7 2019
Name of Federal Candidate	x Support	Office Sought: House District:
TRUMP, DONALD, J, ,	Oppose	🗶 President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2020
Full Name of Payee		Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City State	Zip Code	
Purpose of Expenditure	I	Date of Disbursement or Obligation
Purpose of Experialitire	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures		·
(c) TOTAL Independent Expenditures		10000.00
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.		
	ically Filed] Date	01 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		