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 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
CONNELL DONATELLI, INC.	M M / D D / Y Y Y Y
Mailing Address 117 NORTH SAINT ASAPH STREET	09 05 2018
	Amount
City State Zip Code	2500.00
ALEXANDRIA VA 22314	Transaction ID : SE24.136700
Purpose of Expenditure	Date of Disbursement or Obligation
ONLINE VOTER CONTACT Category/ Type	09 05 / 2018
Name of Federal Candidate Support O	ffice Sought: House District:
TRUMP, DONALD, J, , Oppose	🗶 President Senate State:
Calendar Year-To-Date	isbursement For: Primary X General
Per Election for Office Sought 1970067.93	O20 Other (specify) •
Full Name of Payee	Date of Public Distribution/Dissemination
CONNELL DONATELLI, INC.	M M / D D / Y Y Y Y
Mailing Address 117 NORTH SAINT ASAPH STREET	09 04 2018
THE NORTH SAINT ASAFTISTREET	Amount
City State Zip Code	500.00
ALEXANDRIA VA 22314	Transaction ID : SE24.136701
Purpose of Expenditure	Date of Disbursement or Obligation
ONLINE VOTER CONTACT Category/ Type	09 05 2018
Name of Federal Candidate	Office Sought: House District:
TRUMP, DONALD, J, , Oppose	President Senate State:
Calendar Year-To-Date	Disbursement For: Primary X General
	020 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3000.00
(b) CURTOTAL of Unitersized Independent Constraints	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
(b) 101AL maoportacin Experiancies	4 4
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.	
party committee, any pointoal party committee of its agent.	
Backer, Dan, , ,	M = M / D = D / Y = Y = Y
Signature [Electronically Filed] Date	09 06 2018

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

PAGE OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ GREAT AMERICA PAC C00608489 **✗** 48-hour report X New report Amends report filed on Check if 24-hour report Full Name of Payee Date of Public Distribution/Dissemination CONNELL DONATELLI, INC. 2018 09 05 Mailing Address 117 NORTH SAINT ASAPH STREET Amount State Zip Code City 1000.00 VA 22314 Transaction ID : SE24.136702 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ ONLINE VOTER CONTACT 09 05 2018 Type Name of Federal Candidate Office Sought: **✗** Support House District: TRUMP, DONALD, J,, Oppose President Senate State: **✗** General Disbursement For: Primary Calendar Year-To-Date 2020 1970067.93 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 1000.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... 4000.00 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. Backer, Dan, , , [Electronically Filed] 09 06 2018 Date Signature