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

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
CAMPAIGN SOLUTIONS	M - M / D - D / Y - Y - Y - Y
SEE ESTIMATE TRANSACTION ID#SE24.150869  Mailing Address 117 N SAINT ASAPH ST.	04 01 2019
Maining / Mainin	Amount
City. Ctata 7ia Coda	0407.74
City State Zip Code  ALEXANDRIA VA 22314	8187.74 Transaction ID : SE24.151169
	Date of Disbursement or Obligation
Purpose of Expenditure ONLINE VOTER CONTACT  Category/ Type	05 06 7 2019
Name of Federal Candidate Support Office	e Sought: House District:
TRUMP, DONALD, J., ,	
	ursement For: Primary X General
Per Election for Office Sought 26559.21 2020	
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/	M = M / D = D / Y = Y = Y
Name of Federal Candidate	
Support	e Sought: House District:
Oppose	President Senate State:
Calcindar Tour To Bate	ursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	8187.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
	4 4 4
(c) TOTAL Independent Expenditures	8187.74
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 eithe party committee) any political party committee or its agent.	er, or (ii the reporting entity is not a political
Packer Dan	
	05 06 2019
Signature	