

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 6  
FOR SE OF FORM 24/48

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 checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 05 / 09 / 2016	

Full Name of Payee <b>CAMPAIGN SOLUTIONS</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 06 / 2016	
Mailing Address 117 N. SAINT ASAPH ST		Amount 2500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.83926
Purpose of Expenditure ESTIMATED ONLINE VOTER CONTACT COSTS	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 06 / 2016	
Name of Federal Candidate DONALD J. TRUMP		<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) ▶	
		691893.44	

Full Name of Payee <b>CAMPAIGN SOLUTIONS</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 07 / 2016	
Mailing Address 117 N. SAINT ASAPH ST		Amount 2500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.83927
Purpose of Expenditure ESTIMATED ONLINE VOTER CONTACT COSTS	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 07 / 2016	
Name of Federal Candidate DONALD J. TRUMP		<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) ▶	
		691893.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) 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.

Dan Backer

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2016

Signature

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Form/Schedule: SE  
Transaction ID : SE24.83926

This report amended to reflect increased budget for remainder of May.

Form/Schedule:  
Transaction ID:

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

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FOR SE OF FORM 24/48			

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 checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 05 / 09 / 2016	

Full Name of Payee <b>CAMPAIGN SOLUTIONS</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 08 / 2016	
Mailing Address 117 N. SAINT ASAPH ST		Amount 2500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.83928
Purpose of Expenditure ESTIMATED ONLINE VOTER CONTACT COSTS		Category/Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2016
Name of Federal Candidate DONALD J. TRUMP		<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		691893.44	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>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 09 / 2016	
Mailing Address 117 N. SAINT ASAPH ST		Amount 50000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.83929
Purpose of Expenditure ESTIMATED ONLINE VOTER CONTACT COSTS FOR REMAINDER OF MAY		Category/Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 09 / 2016
Name of Federal Candidate DONALD J. TRUMP		<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		691893.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	52500.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Dan Backer

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Date

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05 / 13 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 4 OF 6  
FOR SE OF FORM 24/48

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 checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 05 / 09 / 2016	

Full Name of Payee <b>POLITICAL LIST BROKERS LLC</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 06 / 2016	
Mailing Address 107 S WEST ST PMB 826		Amount 2500.00	
City ALEXANDRIA	State VA	Zip Code 22314-2824	Transaction ID : SE24.83889
Purpose of Expenditure ESTIMATED ONLINE VOTER CONTACT LIST RENTAL COSTS		Category/Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 06 / 2016
Name of Federal Candidate DONALD J. TRUMP		<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		691893.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>POLITICAL LIST BROKERS LLC</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 07 / 2016	
Mailing Address 107 S WEST ST PMB 826		Amount 2500.00	
City ALEXANDRIA	State VA	Zip Code 22314-2824	Transaction ID : SE24.83890
Purpose of Expenditure ESTIMATED ONLINE VOTER CONTACT LIST RENTAL COSTS		Category/Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 07 / 2016
Name of Federal Candidate DONALD J. TRUMP		<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		691893.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Dan Backer

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05 / 13 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 5 OF 6  
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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 checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 05 / 09 / 2016	

Full Name of Payee <b>POLITICAL LIST BROKERS LLC</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 08 / 2016	
Mailing Address 107 S WEST ST PMB 826		Amount 2500.00	
City ALEXANDRIA	State VA	Zip Code 22314-2824	Transaction ID : SE24.83891
Purpose of Expenditure ESTIMATED ONLINE VOTER CONTACT LIST RENTAL COSTS		Category/Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2016
Name of Federal Candidate DONALD J. TRUMP		<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) ▶	
		691893.44	

Full Name of Payee <b>POLITICAL LIST BROKERS LLC</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 09 / 2016	
Mailing Address 107 S WEST ST PMB 826		Amount 50000.00	
City ALEXANDRIA	State VA	Zip Code 22314-2824	Transaction ID : SE24.83892
Purpose of Expenditure ESTIMATED ONLINE VOTER CONTACT LIST RENTAL COSTS FOR REMAINDER OF MAY		Category/Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 09 / 2016
Name of Federal Candidate DONALD J. TRUMP		<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) ▶	
		691893.44	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	52500.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Dan Backer

[Electronically Filed]

Date

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05 / 13 / 2016

Signature

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Form/Schedule: SE  
Transaction ID : SE24.83892

This vendor is arranging payments to multiple other vendors, but it is not yet known which other vendors will be used or how much will be paid to each. The details of each separate transaction will be reported once this information is available.

Form/Schedule:  
Transaction ID: