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

Schedule E)		PAGE 1 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
GREAT AMERICA PAC		C C00608489
		M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New rep	port Amends report	
Full Name of Payee CAMPAIGN SOLUTIONS		Date of Public Distribution/Dissemination
Mailing Address 117 N SAINT ASAPH ST		10 01 7 2017
Mailing Address 11/ N SAINT ASAPH ST		Amount
City State	Zip Code	30000.00
ALEXANDRIA VA	22314	Transaction ID : SE24.105820 Date of Disbursement or Obligation
Purpose of Expenditure ESTIMATED OCTOBER ONLINE VOTER CONTACT	Category/ Type	10 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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 Other (specify) ☐
Full Name of Payee CAMPAIGN SOLUTIONS		Date of Public Distribution/Dissemination
		10 01 7 2017
Mailing Address 117 N SAINT ASAPH ST		Amount
City State	Zip Code	20000.00
ALEXANDRIA VA	22314	Transaction ID : SE24.105821 Date of Disbursement or Obligation
Purpose of Expenditure ESTIMATED OCTOBER LIST RENTAL FEES	Category/ Type	10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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 Gher (specify) ►
•		
(a) SUBTOTAL of Itemized Independent Expenditures		50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	
Backer, Dan, , , [Electron	nically Filed] Date	09 28 2017
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼			
GREAT AMERICA PAC	C C00608489			
Check if 24-hour report 48-hour report New report Amends report filed on	M / D D / Y Y Y Y			
CAMPAIGN SOLUTIONS	Public Distribution/Dissemination			
Mailing Address 117 N SAINT ASAPH ST Amount				
City State Zip Code	20000.00			
ALEXANDRIA VA 22314 Transac	ction ID : SE24.105822 Disbursement or Obligation			
	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate X Support Office Sought:	House District:			
TRUMP, DONALD, J, , Oppose Presiden				
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Oth	For: Primary X General ner (specify) ►			
CONNELL DONATELLI, INC.	f Public Distribution/Dissemination			
Mailing Address P.O. BOX 1877 Amount	10 01 2017 t			
City State Zip Code	5000.00			
ALEXANDRIA VA 22313 Transac	tion ID : SE24.105823 f Disbursement or Obligation			
	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office Sought:	: House District:			
TRUMP, DONALD, J, , Oppose Presider				
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Oth	For: Primary ✗ General			
(a) SUBTOTAL of Itemized Independent Expenditures	25000.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
	7 7			
(c) TOTAL Independent Expenditures	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.				
Backer, Dan, , , [Electronically Filed] Date 09	28 2017			
Gignature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
GREAT AMERICA PAC	C C00608489			
Check if 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee INFOCISION MANAGEMENT CORPORATION	Date of Public Distribution/Dissemination 10 01 2017			
Mailing Address P.O. BOX 932441	Amount			
City State Zip Code	15000.00			
CLEVELAND OH 44193	Transaction ID : SE24.105824 Date of Disbursement or Obligation			
Purpose of Expenditure ESTIMATED OCTOBER PHONE VOTER CONTACT Category/ Type	10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office S	Sought: House District:			
TRUMP DONALD I	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought Disburs 2020	sement For: Primary X General Other (specify) ▶			
Full Name of Payee MESSAGE MADE EASY, LLC	Date of Public Distribution/Dissemination			
Mailing Address P.O. BOX 230	10 01 2017 Amount			
City State Zip Code	5000.00			
CANAL FULTON OH 44614 T	Fransaction ID : SE24.105826 Date of Disbursement or Obligation			
Purpose of Expenditure ESTIMATED OCTOBER PHONE VOTER CONTACT Category/ Type	10 01 7 2017			
Name of Federal Candidate	Sought: House District:			
TRUMP, DONALD, J, , Oppose	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought Disburg 2020	sement For:			
(a) SUBTOTAL of Itemized Independent Expenditures	20000.00			
(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.				
Backer, Dan, , , [Electronically Filed] Date 09	M / 28 / 2017			
Olymature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
GREAT AMERICA PAC	C C00608489
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name of Payee POLITICAL LIST BROKERS, LLC	f Public Distribution/Dissemination
, M	10 01 2017
Mailing Address 107 S. WEST ST PMB 826 Amoun	nt
City State Zip Code	5000.00
ALEXANDRIA VA 22314 Transa	action ID : SE24.105825 f Disbursement or Obligation
Purpose of Expenditure Category/	10 01 / 2017
Name of Federal Candidate X Support Office Sought:	: House District:
TRUMP, DONALD, J, , Oppose **President Support Office design.** Oppose *** **President Support Office design.**	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Ott	For: Primary General her (specify) ▶
Full Name of Payee Date o	of Public Distribution/Dissemination
RIGHT COUNTRY LISTS	10 01 2017
Mailing Address 117 NORTH SAINT ASAPH STREET Amoun	nt
City State Zip Code	5000.00
	ction ID : SE24.105827 of Disbursement or Obligation
	10 01 2017
Name of Federal Candidate X Support Office Sought	t: House District:
TRUMP, DONALD, J, , Oppose Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Ot	t For: Primary X General ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4
(c) TOTAL Independent Expenditures	105000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cowith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Backer, Dan, , , [Electronically Filed] Date 09	28 / 2017
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