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

Schedule E)	FOR SE OF FORM 24/48
IAME 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	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
CONNELL DONATELLI, INC.	07 05 2018
Mailing Address 117 NORTH SAINT ASAPH STREET	Amount
City Ctota 7in Code	5000.00
City State Zip Code ALEXANDRIA VA 22314	5000.00 Transaction ID : SE24.121544
	Date of Disbursement or Obligation
Purpose of Expenditure ONLINE VOTER CONTACT Category/ Type	07
Name of Federal Candidate Support Offic	e Sought:
WATERS, MAXINE, , ,	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disb 2018	ursement For: Primary General 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	07 02 2018
THE NORTH OF SILVE PROPERTY.	Amount
City State Zip Code	4000.00
ALEXANDRIA VA 22314	Transaction ID : SE24.121545
Purpose of Expenditure ONLINE VOTED CONTACT Category/	Date of Disbursement or Obligation
ONLINE VOTER CONTACT Output Type	07 04 2018
Name of Federal Candidate Support Office	ee Sought: House District:
TRUMP, DONALD, J, , Oppose	President Senate State:
	pursement For: Primary 🗶 General
Per Election for Office Sought 1646562.18 2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	9000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) TOTAL independent Experialitates	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Backer, Dan, , ,	-M / D D / Y - Y - Y
	07 04 2018
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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 PAC	C C00608489
	<u> </u>
Check if 24-hour report 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee RRTVMEDIA, LLC	Date of Public Distribution/Dissemination
INIT VIVILDIA, LLO	07 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. BOX 36819	Amount
City State Zip Code	8000.00
CANTON OH 44735	Transaction ID : SE24.121546 Date of Disbursement or Obligation
Purpose of Expenditure TELEVISION ADVERTISING Category/ Type	07 03 / 2018
Name of Federal Candidate Support Office	e Sought: House District:
TRUMP, DONALD, J, ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disb 2020	ursement For: Primary General Other (specify)
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 Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Office	ee Sought: House District:
Oppose	President Senate State:
Calcindar Tour To Bate	oursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	17000.00
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.	
Bato	07
Signature	