

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) GREAT AMERICA PAC		FEC IDENTIFICATION NUMBER ▼ C C00608489	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee BLACKHAWK SOLUTIONS, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016		
Mailing Address 6341 VALLEY VIEW RD			Amount 40000.00		
City EDMOND	State OK	Zip Code 73034	Transaction ID : SE24.92327		
Purpose of Expenditure VOTER CONTACT, FIELD OPERATIONS FOR NATIONAL GOTV		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 28 / 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		10318472.82	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee CONNELL DONATELLI, INC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 26 / 2016		
Mailing Address PO BOX 1877			Amount 1000.00		
City ALEXANDRIA	State VA	Zip Code 22313	Transaction ID : SE24.92271		
Purpose of Expenditure ONLINE VOTER CONTACT		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 26 / 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		10318472.82	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	41000.00
(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

MM / DD / YYYY
09 / 28 / 2016

Signature

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Full Name of Payee CONNELL DONATELLI, INC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2016		
Mailing Address PO BOX 1877			Amount 15000.00		
City ALEXANDRIA	State VA	Zip Code 22313	Transaction ID : SE24.92324		
Purpose of Expenditure ONLINE VOTER CONTACT		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 28 / 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		10318472.82	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee FRONTLINE STRATEGIES & MEDIA			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2016		
Mailing Address 110 NEWPORT CENTER DRIVE			Amount 205300.00		
City NEWPORT BEACH	State CA	Zip Code 92660	Transaction ID : SE24.92315		
Purpose of Expenditure DIGITAL TV, FIELD OPERATIONS FOR NATIONAL GOTV		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 27 / 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		10318472.82	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	220300.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee RAPID RESPONSE TELEVISION LLC		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>10</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>03</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		10			D	D		03			Y	Y	Y	Y	Y	Y						
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Mailing Address 4850 WRIGHT ROAD		Amount 250000.00																									
City STAFFORD	State TX	Zip Code 77477	Transaction ID : SE24.92316																								
Purpose of Expenditure TELEVISION ADVERTISING	Category/Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>09</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>27</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		09			D	D		27			Y	Y	Y	Y	Y	Y						
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Calendar Year-To-Date Per Election for Office Sought 10318472.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____																									

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D	D																										
Y	Y	Y	Y	Y	Y																						
Purpose of Expenditure	Category/Type	Date of Disbursement or Obligation																									
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: _____																									
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____																									

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	250000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	511300.00

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Signature