

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

 PAGE 1 OF 5  
 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 checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <b>CAMPAIGN SOLUTIONS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 117 N SAINT ASAPH ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8000.00</div>		
City ALEXANDRIA	State VA	Zip Code 22314			
Purpose of Expenditure ESTIMATED DECEMBER 10-31 ONLINE VOTER CONTACT		Category/ Type	Transaction ID : SE24.149519 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Name of Federal Candidate TRUMP, DONALD, J, ,		<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 2020 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>CAMPAIGN SOLUTIONS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Mailing Address 117 N SAINT ASAPH ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">30000.00</div>		
City ALEXANDRIA	State VA	Zip Code 22314			
Purpose of Expenditure ESTIMATED DECEMBER 10-31 LIST RENTAL FEES		Category/ Type	Transaction ID : SE24.149520 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>		
Name of Federal Candidate TRUMP, DONALD, J, ,		<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 2020 <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">38000.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

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2018

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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 PAGE 2 OF 5  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00608489         </div>
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 <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name of Payee <b>CAMPAIGN SOLUTIONS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div>12</div> <div>10</div> <div>2018</div> </div>		
Mailing Address 117 N SAINT ASAPH ST.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10000.00</div>		
City State Zip Code ALEXANDRIA VA 22314	Transaction ID : SE24.149521 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div>12</div> <div>10</div> <div>2018</div> </div>				
Purpose of Expenditure ESTIMATED DECEMBER 10-31 ONLINE DISTRIBUTION COSTS	Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>				
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD, J, ,			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 <div style="border: 1px solid black; padding: 2px; text-align: right;">2915188.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____		

Full Name of Payee <b>CONNELL DONATELLI, INC.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div>12</div> <div>10</div> <div>2018</div> </div>		
Mailing Address 117 NORTH SAINT ASAPH STREET			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8000.00</div>		
City State Zip Code ALEXANDRIA VA 22314	Transaction ID : SE24.149522 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div>12</div> <div>10</div> <div>2018</div> </div>				
Purpose of Expenditure ESTIMATED DECEMBER 10-31 ONLINE VOTER CONTACT	Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>				
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD, J, ,			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 <div style="border: 1px solid black; padding: 2px; text-align: right;">2915188.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;">18000.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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, , ,

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**(Schedule E)**

 PAGE 3 OF 5  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00608489       </div>
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 <b>INFOCISION MANAGEMENT CORPORATION</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address P.O. BOX 932441		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div>	
City CLEVELAND	State OH	Zip Code 44193	<b>Transaction ID : SE24.149523</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>
Purpose of Expenditure ESTIMATED DECEMBER 10-31 PHONE VOTER CONTACT		Category/ Type	
Name of Federal Candidate TRUMP, DONALD, J, ,		<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		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2915188.59</div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee <b>MESSAGE MADE EASY, LLC</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address P.O. BOX 230		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">500.00</div>	
City CANAL FULTON	State OH	Zip Code 44614	<b>Transaction ID : SE24.149524</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">2018</div> </div>
Purpose of Expenditure ESTIMATED DECEMBER 10-31 PHONE VOTER CONTACT		Category/ Type	
Name of Federal Candidate TRUMP, DONALD, J, ,		<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		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2915188.59</div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">20500.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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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 checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>1</td><td>2</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>1</td><td>2</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>8</td><td></td><td></td></tr> </table>		M	M		1	2		D	D		1	2		Y	Y	Y	Y	Y	Y	2	0	1	8		
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Y	Y	Y	Y	Y	Y																						
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Full Name of Payee <b>POLITICAL LIST BROKERS, LLC</b>			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>1</td><td>2</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>1</td><td>0</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>8</td><td></td><td></td></tr> </table>			M	M		1	2		D	D		1	0		Y	Y	Y	Y	Y	Y	2	0	1	8		
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Mailing Address 107 S. WEST ST PMB 826 107 WEST STREET			Amount <table border="1" style="width:100%"> <tr><td>3</td><td>0</td><td>0</td><td>0</td><td></td><td></td></tr> </table>			3	0	0	0																				
3	0	0	0																										
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.149525																										
Purpose of Expenditure ESTIMATED DECEMBER 10-31 ONLINE VOTER CONTACT		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>1</td><td>2</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>1</td><td>0</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>8</td><td></td><td></td></tr> </table>			M	M		1	2		D	D		1	0		Y	Y	Y	Y	Y	Y	2	0	1	8		
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Name of Federal Candidate TRUMP, DONALD, J, ,		<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		<table border="1" style="width:100%"> <tr><td>2</td><td>9</td><td>1</td><td>5</td><td>1</td><td>8</td><td>8</td><td>5</td><td></td><td></td></tr> </table>	2	9	1	5	1	8	8	5			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____																
2	9	1	5	1	8	8	5																						

Full Name of Payee <b>RIGHT COUNTRY LISTS</b>			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>1</td><td>2</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>1</td><td>0</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>8</td><td></td><td></td></tr> </table>			M	M		1	2		D	D		1	0		Y	Y	Y	Y	Y	Y	2	0	1	8		
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Mailing Address 117 NORTH SAINT ASAPH STREET			Amount <table border="1" style="width:100%"> <tr><td>5</td><td>0</td><td>0</td><td>0</td><td></td><td></td></tr> </table>			5	0	0	0																				
5	0	0	0																										
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.149526																										
Purpose of Expenditure ESTIMATED DECEMBER 10-31 ONLINE VOTER CONTACT		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>1</td><td>2</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>1</td><td>0</td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>8</td><td></td><td></td></tr> </table>			M	M		1	2		D	D		1	0		Y	Y	Y	Y	Y	Y	2	0	1	8		
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2	0	1	8																										
Name of Federal Candidate TRUMP, DONALD, J, ,		<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		<table border="1" style="width:100%"> <tr><td>2</td><td>9</td><td>1</td><td>5</td><td>1</td><td>8</td><td>8</td><td>5</td><td></td><td></td></tr> </table>	2	9	1	5	1	8	8	5			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____																
2	9	1	5	1	8	8	5																						

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="width:100%"> <tr><td>3</td><td>5</td><td>0</td><td>0</td><td></td><td></td></tr> </table>	3	5	0	0		
3	5	0	0				
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<table border="1" style="width:100%"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>						
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="width:100%"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>						

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Backer, Dan, , ,

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Date

M	M	
1	2	

D	D	
1	2	

Y	Y	Y	Y	Y	Y
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Signature

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PAGE	5	OF	5
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NAME OF COMMITTEE (In Full) <b>GREAT AMERICA PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00608489																									
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M	M	M	D	D	D	Y	Y	Y	Y	Y	Y																

Full Name of Payee <b>RRTVMEDIA, LLC</b>		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>D</td><td>D</td><td>D</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td> <td>1</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>8</td><td></td><td></td> </tr> </table>		M	M	M	D	D	D	Y	Y	Y	Y	Y	Y	1	2		1	0		2	0	1	8		
M	M	M	D	D	D	Y	Y	Y	Y	Y	Y																
1	2		1	0		2	0	1	8																		
Mailing Address <b>P.O. BOX 36819</b>		Amount <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>4</td><td>5000.00</td> </tr> </table>																								4	5000.00
										4	5000.00																
City <b>CANTON</b>	State <b>OH</b>	Zip Code <b>44735</b>	Transaction ID : <b>SE24.149527</b>																								
Purpose of Expenditure <b>ESTIMATED DECEMBER 10-31 TELEVISION ADVERTISING</b>		Category/Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>D</td><td>D</td><td>D</td> <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> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	M	M	M	D	D	D	Y	Y	Y	Y	Y	Y												
M	M	M	D	D	D	Y	Y	Y	Y	Y	Y																
Name of Federal Candidate <b>TRUMP, DONALD, J, ,</b>		<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		<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>2</td><td>915188.59</td> </tr> </table>																							2	915188.59	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
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Full Name of Payee		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M</td><td>M</td><td>M</td> <td>D</td><td>D</td><td>D</td> <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> <td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M	M	D	D	D	Y	Y	Y	Y	Y	Y												
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Mailing Address		Amount <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																									
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(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>45000.00</td> </tr> </table>																								45000.00
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(c) TOTAL Independent Expenditures.....▶	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>125000.00</td> </tr> </table>																								125000.00
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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

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
1	2		1	2		2	0	1	8		

Signature