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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation		
WE ARE WISCONSIN POLITICAL FUND		
(b) Address (number and street) check if different than previously reported 8033 EXCELSIOR DRIVE SUITE A		
(c) City, State and ZIP Code	3. FEC Identification Number	
MADISON WI 53717	3. FEC Identification Number	
Occupation and Name of Employer (for Individual Filers Only)	C C90014267	
2. Occupation and Name of Employer (for individual Filets Only)		
4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? FROM THROUGH MMM THROUGH April 15 Quarterly Report 24-Hour Report 48-Hour Report Yes, it amends the report filed on		
TOTAL CONTRIBUTIONS 7. TOTAL INDEPENDENT EXPENDITURES	.00 17233.00	
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 any political party committee or its agent.		
	DATE [Electronically Filed]	
Alyssa Whitney Alyssa Whitney	08/26/2016	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.		

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 3 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) WE ARE WISCONSIN POLITICAL FUND Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination We Are Wisconsin, Inc. 08 26 2016 Mailing Address 8033 Excelsior Drive Ste. A Amount Zip Code City State 4309.00 Madison WI 53717 Transaction ID: F57.000001 WI Purpose of Expenditure Office Sought: House Category/ State: 001 Field Staff expenses Type X Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Russ Feingold Check One: Support Oppose ✗ General Disbursement For: Primary Calendar Year-To-Date Per Election 2016 .00 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination We Are Wisconsin, Inc. 80 26 2016 Mailing Address 8033 Excelsior Drive Ste. A Amount City State Zip Code 4308.00 Madison WI 53717 Transaction ID: F57.000002 WI Purpose of Expenditure Office Sought: House Category/ State: 001 Field Staff expenses Type X Senate District:. President Name of Federal Candidate Supported or Opposed by Expenditure: Ron Johnson Support Check One: **X** Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election .00 2016 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination We Are Wisconsin, Inc. 2016 80 26 Mailing Address 8033 Excelsior Drive Ste. A Amount State Zip Code City 4308.00 WI 53717 Madison Transaction ID: F57.000003 Purpose of Expenditure Office Sought: House Category/ State: 001 Field Staff expenses Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Hillary Clinton **X** Support Check One: Oppose Disbursement For: 2016 Primary General Calendar Year-To-Date Per Election .00 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 12925.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3 FOR LINE 7 OF FORM 5

IAME OF FILER (In Full) WE ARE WISCONSIN POLITICAL FUND		
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
We Are Wisconsin, Inc.	08 26 2016	
Mailing Address 8033 Excelsior Drive Ste. A		
	Amount	
City State Zip Code Madison WI 53717	4308.00	
Purpose of Expenditure Category/	Office Sought: House State:	
Field Staff expenses 001	Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure: Donald Trump	Check One: Support Oppose	
	Check Che Cupport Oppose	
Calendar Year-To-Date Per Election for Office Sought00	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
	M = M / D = D / Y = Y = Y	
Mailing Address		
City State Zip Code	Amount	
City State Zip Code		
Purpose of Expenditure Category/	Office Sought: House State:	
Type	Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination		
	M = M / D = D / Y = Y = Y	
Mailing Address		
	Amount	
City State Zip Code		
Purpose of Expenditure Category/	Office Sought: House State:	
Type	Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	4308.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	17233.00	