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Image# 201602119008454073

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X   Fo	or Other Than	An Authorized	l Committ	ee		Office Use Only
1. NAME OF T COMMITTEE (in full)	YPE OR PRINT		mple: If typi	ng, type	12FE4M5	
RIBBLE RESPONSIBLE	E GOVERNM	MENT COMM	ITTEE			
ADDRESS (number and street)	824 S Milledge Av	ve Ste 101				
Check if different than previously reported. (ACC)	Athens				GA	30605
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦		5	STATE A	ZIP CODE ▲
C C00499202		3. IS THIS REPORT		NEW (N) <b>OR</b>	AM (A)	IENDED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15	(b) Monthly Report Due On:	Feb 20 (M2)  Mar 20 (M3)  Apr 20 (M4)	Ğ.	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) Nov 20 (M11 (Non-Election Year Only)  20 (M9) Dec 20 (M12 (Non-Election Year Only)  20 (M10) Jan 31 (YE)
Quarterly Report (Q1  July 15 Quarterly Report (Q2  October 15 Quarterly Report (Q3  January 31 Year-End Report (YE	PRE-EI Report		Primary (12F		General (	
July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)	(d) 30-Day	Election for the:	General (300	G) /	Runoff (3	OR) Special (30S) in the State of
5. Covering Period 01	01	2016	through	M M 02	/ D D /	2016
certify that I have examined this	Report and to th	ne best of my kno	wledge and	belief it is tru	e, correct and	complete.
Type or Print Name of Treasurer	PAUL KILGORE					
Signature of Treasurer PAUL I	KILGORE		[Electronicall	y Filed] D	ate 02	11 2016
NOTE: Submission of false, erroned	ous, or incomplete	information may su	bject the per	son signing th	is Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

R		01 01 2016	To: 02 11 2016
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		1500.00
	(b) Cash on Hand at Beginning of Reporting Period	1500.00	
	(c) Total Receipts (from Line 19)	5170.21	5170.21
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	6670.21	6670.21
<b>'</b> .	Total Disbursements (from Line 31)	6670.21	6670.21
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0.00
).	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	This committee has qualified as a multication	andidate committee. (see FEC FORM 1M)	

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### RIBBLE RESPONSIBLE GOVERNMENT COMMITTEE

R	eport Covering the Period: From: 01	01 2016 To:	02 11 2016
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized(iii) TOTAL (add	, 0.00	0.00
	Lines 11(a)(i) and (ii)▶	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12.	Transfers From Affiliated/Other Party Committees	5170.21	5170.21
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18.	Transfers from Non-Federal and Levin Funds  (a) Non-Federal Account  (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	5170.21	5170.21
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	5170.21	5170.21

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period				
. Operating Expenditures: —	Total Tills I criod	Calendar Year-to-Date			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)					
(i) Federal Share	0.00	0.00			
(**) N 5 1 101	0.00	0.00			
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00			
(b) Other Federal Operating  Expenditures	500.00	500.00			
(c) Total Operating Expenditures	7				
(add 21(a)(i), (a)(ii), and (b))▶	500.00	500.00			
Transfers to Affiliated/Other Party		77004			
Committees Contributions to	770.21	770.21			
Federal Candidates/Committees and Other Political Committees	0.00	0.00			
Independent Expenditures					
(use Schedule E)	0.00	0.00			
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00				
(use Schedule F)	0.00	0.00			
Loan Repayments Made	0.00	0.00			
Loan Hopaymonio Wado					
Loans Made	0.00	0.00			
Refunds of Contributions To: (a) Individuals/Persons Other					
Than Political Committees	5400.00	5400.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees	, , ,				
(such as PACs)	0.00	0.00			
(d) Total Contribution Refunds					
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	5400.00	5400.00			
(433 2.1100 20(4), (5), 4.14 (6),					
Other Disbursements	0.00	0.00			
_	, , , , , , , , , , , , , , , , , , , ,				
Federal Election Activity (2 U.S.C. §431(20))					
(a) Allocated Federal Election Activity (from Schedule H6)					
(i) Federal Share	0.00	0.00			
"					
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely	0.00	0.00			
With Federal Funds	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	6670.21	6670.21			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	6670.21	6670.21			

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00	
4. Total Contribution Refunds (from Line 28(d))	5400.00	5400.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-5400.00	-5400.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	500.00	500.00	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
3. Net Operating Expenditures (subtract Line 37 from Line 36)	500.00	500.00	

## SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

	F	OR	LINE	NU	MBER	:	PAGE		6	OF	9
Use separate schedule(s)	(0	he	ck only	or	ne)						
for each category of the Detailed Summary Page			11a		11b		11c	X	12		
			13		14		15		16		17

Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) RIBBLE RESPONSIBLE GOVE	ERNMENT COMMITTEE	
Full Name (Last, First, Middle Initial)  A. RIBBLE FOR CONGRESS  Mailing Address PO BOX 7200		Date of Receipt
		02 05 2016
City	State Zip Code	Transaction ID : SA12.4320
APPLETON	WI 54912	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00463620	5170.21
Name of Employer	Occupation	Transfer of Net JFC Funds
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5170.21	
Full Name (Last, First, Middle Initial)  3.		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		5170.21
TOTAL This Period (last page this line number	only)	5170.21

# S ľ

Use segrate schedule(s) for each category of each category of each category of each category of each each each each each each each each	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF							9			
Detailed Summary Page 20 20 28 29 30b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicing contributions or for commercial purposes, other than using the ame and address of any political committee to solicit committee.  NAME OF COMMITTEE (In Full) RIBBLE RESPONSIBLE GOVERNMENT COMMITTEE  Full Name (Last, Frat, Middle Initial) A. Professional Data Services, Inc.  Mailing Address 824 S Milledge Ave Size 101  City State Zp Code Alhens GA 30605  Purpose of Disbursement JFC Compliance Consulting Candidate Name  Office Sought: House Disbursement For:  Full Name (Last, Frat, Middle Initial) B. Mailing Address  City State Zp Code Purpose of Disbursement  Candidate Name  Office Sought: House Disbursement For:  Full Name (Last, Frat, Middle Initial) C. Mailing Address  City State Zp Code  Purpose of Disbursement  Candidate Name  Office Sought: Senate Disbursement For:  Full Name (Last, Frat, Middle Initial) C. Mailing Address  City State Zp Code  Purpose of Disbursement  Candidate Name  Office Sought: Senate Senate Primary General Office Sought: Senate Senate Primary General Office Sought: Senate Senate Office Sought: Senate Office Sought: Senate Senate Office Sought: Senate Office Sought: Senate Senate Office Sought: Sen	IT	EMIZED DISBURSEMENTS			(criccit offly offe)				1.00					
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of sny political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  RIBBLE RESPONSIBLE GOVERNMENT COMMITTEE  Full Name (Last, First, Middle Initial)  A. Professional Data Services, Inc.  Mailing Address 824 S Milliadge Ave Site 101  City State Zip Code Alhens GA 30605  Purpose of Disbursement  JFC Compliance Consulting  Candidate Name  Category/ Type  Full Name (Last, First, Middle Initial)  B. Date of Disbursement  JFC Compliance Consulting  Candidate Name  Category/ Type  District  Full Name (Last, First, Middle Initial)  B. Date of Disbursement  Candidate Name  Category/ Type  Furpose of Disbursement  Candidate Name  Disbursement  District  Full Name (Last, First, Middle Initial)  Category/ Type  Date of Disbursement  Amount of Each Disbursement  Category/ Type  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  District  Full Name (Last, First, Middle Initial)  Candidate Name  District  Full Name (Last, First, Middle Initial)  Category/ Type  District  Full Name (Last, First, Middle Initial)  Date of Disbursement  Category/ Type  District  Amount of Each Disbursement this Period  Category/ Type  District  District  District  Full Name (Last, First, Middle Initial)  Date of Disbursement  Category/ Type  District  Di					×									
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Pull) RIBBLE RESPONSIBLE GOVERNMENT COMMITTEE  Full Name (Last, Frist, Middle Initial)  A. Professional Data Services, Inc.  Mailing Address 824 S Milledge Ave Ste 101  City State Zip Code Athens Complaines Consulting Complaines Consulting Complaines Consulting Complaines Consulting Conditions Name  District  Full Name (Last, Frist, Middle Initial)  B. District  Full Name (Last, Frist, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District  Full Name (Last, Frist, Middle Initial)  Date of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  District  Substrict Disbursement For: Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District  Substrict Disbursement This Page (optional)	Δr	ny information conject from such Reports and Statem	lents may not be sold or	lleeq	hy any			nur		of se			ıtions	
Full Name (Last, First, Middle Initial)  A. Professional Data Services, Inc.    Mailing Address   Mailedge Ave Ste 101	or	for commercial purposes, other than using the name	ne and address of any poli	itical (	commit	tee to	solicit co	ntrik	outions	fro	m such	commi	ttee.	
Full Name (Last, First, Middle Initial)  A. Professional Data Services, Inc.  Mailing Address 824 S Milledge Ave Ste 101  City State Zip Code GA 30605  Purpose of Disbursement JFC Compliance Consulting  Candidate Name  City State Zip Code Altherns JFC Compliance Consulting  Candidate Name  City State Zip Code Primary General		, ,												
A. Professional Data Services, Inc.    Mailing Address 824 S Milledge Ave Ste 101	$  \rangle$	RIBBLE RESPONSIBLE GOVERN	MENT COMMITT	EE										
A. Professional Data Services, Inc.    Mailing Address 824 S Milledge Ave Ste 101	_	Full Name (Last. First. Middle Initial)												
Mailing Address 824 S Milledge Ave Ste 101  City Alhens GA 30605  Purpose of Disbursement JFC Compliance Consulting  Candidate Name  Office Sought: House President  Candidate Name  City Alhens State: District:  Full Name (Last, First, Middle Initial)  B.  Mailing Address  City State Zip Code Primary General Other (specify) ▼  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category' Type  Date of Disbursement this Period  Category' Type  Office Sought: House Senate Primary General Other (specify) ▼  Senate President Other (specify) ▼  Date of Disbursement this Period  Category' Type  Office Sought: House Senate Primary General Other (specify) ▼  Date of Disbursement this Period  Category' Type  Amount of Each Disbursement this Period  Category' Type  Office Sought: House Disbursement For: Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category' Type  Date of Disbursement  Category' Type  Category' Type  Date of Disbursement  Candidate Name  Category' Type  Office Sought: House Disbursement For: Senate Primary General Primary General Other (specify) ▼  Subtotal of Disbursement this Period  Category' Type  Date of Disbursement This Period	A.	,					Date o	f Di	sburse	emei	nt			
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Athens Purpose of Disbursement JFC Compliance Consulting Cardidate Name  Calegory/ Type  Office Sought: House Primary General President Other (specify)   Mailing Address  City State Zip Code  Purpose of Disbursement Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Primary General Other (specify)   Office Sought: Other (specify)   Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: Other (specify)   Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: Other (specify)   Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: Other (specify)   Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: Other (specify)   State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: Other (specify)   State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: Other (specify)   State Disbursement For: Senate Primary General Other (specify)   Substortal of Disbursements This Page (optional)		Mailing Address 824 S Milledge Ave Ste 101					02	-	0	8		2016	_	
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Candidate Name  Office Sought: House Senate President Other (specify) ▼  Full Name (Last, First, Middle Initial)  B. Malling Address  City State Zip Code  Purpose of Disbursement  Candidate Name President Other (specify) ▼  State: District:  District: Senate Primary General Primary General Other (specify) ▼  Amount of Each Disbursement this Period  Category/ Type  C. Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Malling Address  City State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: House Disbursement For: Senate President General President General President General Other (specify) ▼  State: District: Senate Primary General Other (specify) ▼  Substortal of Disbursement This Page (optional)		•		П			Amour	ıt of	Each	Dis	bursem	ent this	Perio	od
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State: District:  Full Name (Last, First, Middle Initial)  B.  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House President Primary General President State: District:  Full Name (Last, First, Middle Initial)  C.  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: State Zip Code  Purpose of Disbursement For: Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: State Zip Code  Purpose of Disbursement  Candidate Name Category/ Type  Office Sought: House Disbursement For: Primary General President Other (specify) ▼  State: District: Primary General Primary General President State: District: Substrict: Primary General President State: District: Substrict: Substri														
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Candidate Name    Category/ Type		City	State Zip Code											
Candidate Name  Office Sought:		Purpose of Disbursement		T	-									
Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Other (specify)   Office Sought: House Disbursement For: General Other (specify)   State: District:  Supart President State: District:   Supart State: District:   Supart State: District:   Supart State: Supart State							Amoun	t of	Each	Dis	bursem	ent this	Perio	d
Office Sought: House Senate Primary General Other (specify) ▼  State: District: District: District: Date of Disbursement  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Substate: District: District: Substate State S		Candidate Name				y/								П
Senate Primary General Other (specify)  State: District:  C. Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Primary General Primary General Other (specify)  Senate Primary General Other (specify)  State: District:  Substoctal Disbursement For:  Senate Primary General Other (specify)  State: District:		Office Sought: House Disbursen	nent For:		туре			Ť	7		7			
State: District:  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Category/ Type  Office Sought: House Primary General  Other (specify)  State: District:  Substoctal Disbursements This Page (optional)														
Full Name (Last, First, Middle Initial)  Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Primary General President  State: District:  Substract This Page (optional)			Other (specify) ▼											
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Subtotal of Disbursement  State: Disbursements This Page (optional)	_					-								
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City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Subtotal of Disbursements This Page (optional)							M M	/	D	D	/ Y	YY	Υ	
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Prresident Other (specify) ▼  Suate: District:  Substruct: For the primary General Primary General Other (specify) ▼  Substruct: For the primary General Primary General Other (specify) ▼		Mailing Address							L.				_	
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Prresident Other (specify) ▼  Suate: District:  Substruct: Foo on		City	State Zip Code											
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Substruct: Substruct: 500.00														
Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼  Subtrotal of Disbursements This Page (optional)		Purpose of Disbursement		Ιг				. ,		D: 1				
Office Sought: House Disbursement For: Senate Primary General Other (specify)  State: District:  SUBTOTAL of Disbursements This Page (optional)	Candidate Name				\/\	Amoun	it of	Each	Dis	bursem	ent this	Perio	d	
Senate Primary General Other (specify)  State: District:  SUBTOTAL of Disbursements This Page (optional)					Type	y,			7		7			
State: District: Other (specify)   SUBTOTAL of Disbursements This Page (optional)														
State: District:  SUBTOTAL of Disbursements This Page (optional)			-											
FOR OR	_													
FOR OR	Г	,						-	-		_		2.02	$\overline{}$
TOTAL This Period (last page this line number only).	s	UBTOTAL of Disbursements This Page (optional)				<b>•</b>		_	7		7	50	J.UU	
	_	OTAL This Period (last page this line number only)										50	0.00	

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SCHEDULE B (FEC Form 3X)		FOD ! !!!	FOR LINE NUMBER: PAGE 8 OF 9						
ITEMIZED DISBURSEMENTS	Use separate schedule(s	)   FOR LINE (check only	one)						
	for each category of the Detailed Summary Page	21b	22 23 24 25 26						
	<u> </u>	27	28a 28b 28c 29 30b						
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan									
NAME OF COMMITTEE (In Full)									
$ \; angle$ RIBBLE RESPONSIBLE GOVERN	IMENT COMMITTE	Ε							
Full Name (Last, First, Middle Initial)									
A. RIBBLE FOR CONGRESS			Date of Disbursement						
<del></del>			M M / D D / Y Y Y Y						
Mailing Address PO BOX 7200			02 08 2016						
City	State Zip Code		Transaction ID ODGG 4000						
APPLETON	WI 54912		Transaction ID: SB22.4322						
Purpose of Disbursement Transfer of Net JFC Funds			Amount of Each Disbursement this Period						
Candidate Name		Category/							
		Type	500.64						
Office Sought: House Disburser									
Senate President	Primary General Other (specify) ▼								
State: WI District: 08	(a) (a) (a) (b) (b) (b) (b) (b) (b) (b) (b) (b) (b								
Full Name (Last, First, Middle Initial)									
B. TITLETOWN PAC			Date of Disbursement						
Mailing Address PO BOX 15593			02 08 2016						
			Ç						
	State Zip Code DC 20003		Transaction ID : SB22.4323						
WASHINGTON Purpose of Disbursement	DC 20003								
Transfer of Net JFC Funds			Amount of Each Disbursement this Period						
Candidate Name		Category/	269.57						
Office Sought: House Disburser	ment For:	Туре							
Senate	Primary General								
President	Other (specify) ▼								
State: District:									
Full Name (Last, First, Middle Initial)  C.			Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address									
City	State Zip Code								
Purpose of Disbursement									
•			Amount of Each Disbursement this Period						
Candidate Name		Category/							
Office Sought: House Disburser	mont For:	Туре							
Senate Disburser	Primary General								
President	Other (specify)								
State: District:									
CURTOTAL of Dichurananta This Days (1911)			770.21						
SUBTOTAL of Disbursements This Page (optional)		······							
TOTAL This Period (last page this line number only)			770.21						

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SCHEDULE B (FEC Form 3X)			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any information conied from such Departs and Older	anto mou not be seld excess		
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	<u> </u>		
ig  RIBBLE RESPONSIBLE GOVERN	MENT COMMITTEE	<b>.</b>	
Full Name (Last, First, Middle Initial)  A. Karl A Schmidt			Date of Disbursement
··· Nan A Schillial			M M / D D / Y Y Y
Mailing Address 2085 Sandalwood Ct			02 04 2016
Cib.	Note 7 0 :		
City S Green Bay	State Zip Code WI 54304		Transaction ID : SB28A.4318
Purpose of Disbursement	J7JU4		
Refund			Amount of Each Disbursement this Period
Candidate Name		Category/	2700.00
Office Sought: House Disbursen	nent For:	Type	2100.00
	nent For: Primary General		
	Other (specify) ▼		
State: District:	· 		
Full Name (Last, First, Middle Initial)			
B. Richard L Wilkey			Date of Disbursement
Mailing Address 5112 N Hwy 83			02 04 2016
			VT 2010
,	State Zip Code		Transaction ID : SB28A.4319
Hartland Purpose of Disbursement	WI 53029		
Refund			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	2700.00
Office Sought: House Disbursen			
	Primary General Other (specify) ▼		
State: District:	omor (specify) ▼		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
Martin A Li			M = M / D = D / Y = Y = Y
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		الحبيا	Amount of Each Disbursement this Period
		Category/ Type	
Office Sought: House Disbursen	nent For:	21 -	
	Primary General		
	Other (specify) ▼		
I HOTPLOT:			
State: District:			
			5400.00
SUBTOTAL of Disbursements This Page (optional)		······ •	5400.00