

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

FRIENDS OF PETER THERON

ADDRESS (number and street) 1021 SEQUOIA TRAIL

Check if different than previously reported. (ACC)

MADISON

WI

53713

2. **FEC IDENTIFICATION NUMBER** ▼

C C00450353

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

WI

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CHRISTINE BROOKS

Signature of Treasurer CHRISTINE BROOKS

[Electronically Filed]

Date

/  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

|                 |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**FRIENDS OF PETER THERON**

Report Covering the Period: From:  /  /  To:  /  /

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| <b>6. Net Contributions (other than loans)</b>  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 6402.64                 | 8998.87                            |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                              | 6402.64                 | 8998.87                            |
| <b>7. Net Operating Expenditures</b>  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 7319.65                 | 7944.34                            |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....  | 7319.65                 | 7944.34                            |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27).....</b>                                       | 616.85                  |                                    |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b>  | 0.00                    |                                    |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b> | 0.00                    |                                    |

**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 3 (Revised 12/2003)

Write or Type Committee Name

**FRIENDS OF PETER THERON**

Report Covering the Period: From:  /  /  To:  /  /

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                                       |  |
| (a) Individuals/Persons Other Than Political Committees  |                                       |  |
| (i) Itemized (use Schedule A).....   | 4110.00                               | 4013.09                                    |
| (ii) Unitemized.....   | 2292.64                               | 4810.78                                    |
| (iii) TOTAL of contributions from individuals ▶  | 6402.64                               | 8823.87                                    |
| (b) Political Party Committees.....  | 0.00                                  | 175.00                                     |
| (c) Other Political Committees (such as PACs).....   | 0.00                                  | 0.00                                       |
| (d) The Candidate.....   | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 6402.64                               | 8998.87                                    |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>  | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>  |                                       |  |
| (a) Made or Guaranteed by the Candidate.....   | 0.00                                  | 0.00                                       |
| (b) All Other Loans.....   | 0.00                                  | 0.00                                       |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....   | 0.00                                  | 0.00                                       |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 0.00                                       |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  | 0.00                                  | 0.00                                       |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 6402.64                               | 8998.87                                    |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 7319.65                       | 7944.34                            |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 1500.00                            |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 1500.00                            |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 7319.65                       | 9444.34                            |

**III. CASH SUMMARY**

|   |         |
|---|---------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 1533.86 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 6402.64 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 7936.50 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 7319.65 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 616.85  |

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 5 OF 14 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE GIALAMAS**

Mailing Address 1200 JOHN Q HAMMONS DR #500

City MADISON State WI Zip Code 53717

FEC ID number of contributing federal political committee. **C**

Name of Employer GIALAMAS COMPANY Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2014

**Transaction ID : SA11AI.5007**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**BILL HAIGHT**

Mailing Address 51 BURROWS RD

City MADISON State WI Zip Code 53704

FEC ID number of contributing federal political committee. **C**

Name of Employer MAGNA Occupation PUBLISHER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2014

**Transaction ID : SA11AI.4983**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**SHARON JOHNSON**

Mailing Address PO BOX 65

City AVOCA State WI Zip Code 53506

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2014

**Transaction ID : SA11AI.5006**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 6 OF 14 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT KELLER**

Mailing Address 7310 LONGMEADOW RD

City MADISON State WI Zip Code 53717

FEC ID number of contributing federal political committee. **C**

Name of Employer KELLER REALTORS Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2014

**Transaction ID : SA11AI.5028**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**LINDA KOLBE**

Mailing Address 9300 GORST RD

City MAZOMANIE State WI Zip Code 53560

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2014

**Transaction ID : SA11AI.5027**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**DARLENE LUEDTKE**

Mailing Address 6225 MINERAL POINT RD #C-73

City MADISON State WI Zip Code 53705

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation NONE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : SA11AI.4999**

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 14  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

**A.** Full Name (Last, First, Middle Initial)  
**DONNA PETERS**

Mailing Address 1248 PROSPECT COMMONS

City State Zip Code  
SUN PRAIRIE WI 53590

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED NONE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : SA11AI.4974**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**MILTON POWELL**

Mailing Address 353 LAKE ST

City State Zip Code  
BARABOO WI 53913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
285.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : SA11AI.5016**

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
**CAROL SKORUPAN**

Mailing Address 1810 THORSTRAND RD

City State Zip Code  
MADISON WI 53705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AMERPRISE FINANCIAL ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : SA11AI.4955**

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

775.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 OF 14 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

**A.** Full Name (Last, First, Middle Initial)  
**CAROL SKORUPAN**

Mailing Address 1810 THORSTRAND RD

City MADISON State WI Zip Code 53705

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERPRISE Occupation FINANCIAL ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : SA11AI.4977**

Amount of Each Receipt this Period  
**400.00**

**B.** Full Name (Last, First, Middle Initial)  
**CAROL SKORUPAN**

Mailing Address 1810 THORSTRAND RD

City MADISON State WI Zip Code 53705

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERPRISE Occupation FINANCIAL ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1235.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 20 / 2014

**Transaction ID : SA11AI.4985**

Amount of Each Receipt this Period  
**435.00**

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL THERON**

Mailing Address 534 STARMOUNT LANE

City HENDERSONVILLE State NC Zip Code 28791

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation NONE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2014

**Transaction ID : SA11AI.4980**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1835.00**

**4110.00**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 9 OF 14 |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |              |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. A QUALITY SIGNS</b>  |  | Date of Disbursement                    |
| Mailing Address 4606 PFLAUM RD  |  | M M / D D / Y Y Y Y<br>09 / 22 / 2014   |
| City<br>MADISON   | State<br>WI  | Zip Code<br>53718                       |
| Purpose of Disbursement   | Category/<br>Type  | Amount of Each Disbursement this Period |
| Candidate Name  | 001  | 276.93                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Transaction ID : SB17.5065</b>       |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BIG RADIO</b>  |  | Date of Disbursement                    |
| Mailing Address W4765 RADIO LANE  |  | M M / D D / Y Y Y Y<br>07 / 31 / 2014   |
| City<br>MONROE  | State<br>WI  | Zip Code<br>53566                       |
| Purpose of Disbursement   | Category/<br>Type  | Amount of Each Disbursement this Period |
| Candidate Name  | 004  | 256.00                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Transaction ID : SB17.4967</b>       |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BIG RADIO</b>  |  | Date of Disbursement                    |
| Mailing Address W4765 RADIO LANE  |  | M M / D D / Y Y Y Y<br>08 / 29 / 2014   |
| City<br>MONROE  | State<br>WI  | Zip Code<br>53566                       |
| Purpose of Disbursement   | Category/<br>Type  | Amount of Each Disbursement this Period |
| Candidate Name  | 004  | 496.00                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Transaction ID : SB17.5054</b>       |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1028.93 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 10 OF 14 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

|   |  |                      |   |  |
|---|--|----------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CLEAR CHANNEL</b>  |  |                      | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 28 / 2014 |  |
| Mailing Address PO BOX 99   |  |                      | Amount of Each Disbursement this Period<br>495.80             |  |
| City<br>MADISON   | State<br>WI  | Zip Code<br>53701    | Transaction ID : SB17.4966                                    |  |
| Purpose of Disbursement   |  | Category/Type<br>004 |   |  |
| Candidate Name  |  |                      |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                      |   |  |
| State: District:  |  |                      |   |  |

|   |  |                      |   |  |
|---|--|----------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CLEAR CHANNEL</b>  |  |                      | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 04 / 2014 |  |
| Mailing Address PO BOX 99   |  |                      | Amount of Each Disbursement this Period<br>495.80             |  |
| City<br>MADISON   | State<br>WI  | Zip Code<br>53701    | Transaction ID : SB17.5041                                    |  |
| Purpose of Disbursement   |  | Category/Type<br>004 |   |  |
| Candidate Name  |  |                      |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                      |   |  |
| State: District:  |  |                      |   |  |

|   |  |                      |   |  |
|---|--|----------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CLEAR CHANNEL</b>  |  |                      | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 11 / 2014 |  |
| Mailing Address PO BOX 99   |  |                      | Amount of Each Disbursement this Period<br>262.90             |  |
| City<br>MADISON   | State<br>WI  | Zip Code<br>53701    | Transaction ID : SB17.5042                                    |  |
| Purpose of Disbursement   |  | Category/Type<br>004 |   |  |
| Candidate Name  |  |                      |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                      |   |  |
| State: District:  |  |                      |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1254.50 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 11 OF 14                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CLEAR CHANNEL</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 14 / 2014                          |
| Mailing Address PO BOX 99  |  | Amount of Each Disbursement this Period<br>300.90<br><b>Transaction ID : SB17.5044</b> |
| City MADISON State WI Zip Code 53701   | Purpose of Disbursement<br>Candidate Name<br>004<br>Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CLEAR CHANNEL</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 18 / 2014                          |
| Mailing Address PO BOX 99  |  | Amount of Each Disbursement this Period<br>330.90<br><b>Transaction ID : SB17.5047</b> |
| City MADISON State WI Zip Code 53701   | Purpose of Disbursement<br>Candidate Name<br>004<br>Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CLEAR CHANNEL</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 19 / 2014                          |
| Mailing Address PO BOX 99  |  | Amount of Each Disbursement this Period<br>300.90<br><b>Transaction ID : SB17.5048</b> |
| City MADISON State WI Zip Code 53701   | Purpose of Disbursement<br>Candidate Name<br>004<br>Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 932.70 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 12 OF 14                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CLEAR CHANNEL</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 22 / 2014                          |
| Mailing Address PO BOX 99   |  | Amount of Each Disbursement this Period<br>601.80<br><b>Transaction ID : SB17.5052</b> |
| City<br>MADISON   | State<br>WI  |  |
| Zip Code<br>53701   | Purpose of Disbursement<br>004   |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CLEAR CHANNEL</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 02 / 2014                          |
| Mailing Address PO BOX 99   |  | Amount of Each Disbursement this Period<br>558.70<br><b>Transaction ID : SB17.5055</b> |
| City<br>MADISON   | State<br>WI  |  |
| Zip Code<br>53701   | Purpose of Disbursement<br>004   |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CLEAR CHANNEL</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 08 / 2014                          |
| Mailing Address PO BOX 99   |  | Amount of Each Disbursement this Period<br>485.60<br><b>Transaction ID : SB17.5059</b> |
| City<br>MADISON   | State<br>WI  |  |
| Zip Code<br>53701   | Purpose of Disbursement<br>004   |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1646.10 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 13 OF 14                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CLEAR CHANNEL</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 15 / 2014                          |
| Mailing Address PO BOX 99  |  | Amount of Each Disbursement this Period<br>485.60<br><b>Transaction ID : SB17.5063</b> |
| City MADISON State WI Zip Code 53701                               | Purpose of Disbursement<br>004<br>Category/Type  |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President                          |  |
| State: District:   | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CLEAR CHANNEL</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 22 / 2014                          |
| Mailing Address PO BOX 99  |  | Amount of Each Disbursement this Period<br>485.60<br><b>Transaction ID : SB17.5064</b> |
| City MADISON State WI Zip Code 53701                               | Purpose of Disbursement<br>004<br>Category/Type  |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President                          |  |
| State: District:   | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CLEAR CHANNEL</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 29 / 2014                          |
| Mailing Address PO BOX 99  |  | Amount of Each Disbursement this Period<br>455.60<br><b>Transaction ID : SB17.5072</b> |
| City MADISON State WI Zip Code 53701                               | Purpose of Disbursement<br>004<br>Category/Type  |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President                          |  |
| State: District:   | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1426.80 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 14 OF 14                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF PETER THERON**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PARK BANK</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 31 / 2014 |
| Mailing Address 2910 CROSSROADS DR   |   | Amount of Each Disbursement this Period<br>3.00               |
| City MADISON State WI Zip Code 53718   | Purpose of Disbursement<br>001<br>Category/Type |   |
| Candidate Name   |   | <b>Transaction ID : SB17.5040</b>                             |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. WCLO</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 14 / 2014 |
| Mailing Address PO BOX 5001  |   | Amount of Each Disbursement this Period<br>443.50             |
| City JANESVILLE State WI Zip Code 53547  | Purpose of Disbursement<br>004<br>Category/Type |   |
| Candidate Name   |   | <b>Transaction ID : SB17.5043</b>                             |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. WCLO</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 24 / 2014 |
| Mailing Address PO BOX 5001  |   | Amount of Each Disbursement this Period<br>282.50             |
| City JANESVILLE State WI Zip Code 53547  | Purpose of Disbursement<br>004<br>Category/Type |   |
| Candidate Name   |   | <b>Transaction ID : SB17.5068</b>                             |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:                                |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 729.00  |
| <b>TOTAL</b> This Period (last page this line number only)..... | 7018.03 |