

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

People's Voice PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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

## 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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE**-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day **POST**-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> 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 Michael Childers

Signature of Treasurer Michael Childers [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									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

People's Voice PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		20135.93
(b) Cash on Hand at Beginning of Reporting Period.....	3354.00	
(c) Total Receipts (from Line 19) .....	5400.05	218987.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	8754.05	239122.99
7. Total Disbursements (from Line 31).....	3380.36	233749.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5373.69	5373.69
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. 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 multicandidate 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

**People's Voice PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 25 / 2014 To: M M / D D / Y Y Y Y 12 / 31 / 2014

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).....	200.00	196315.00
(ii) Unitemized .....	0.00	2584.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	200.00	118722.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3500.00	69500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	3700.00	188222.50
12. Transfers From Affiliated/Other Party Committees.....	1700.05	30414.56
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	350.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. 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))..... ▶	5400.05	218987.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5400.05	218987.06

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3380.36	102249.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3380.36	102249.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	19000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	112500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. 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 With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3380.36	233749.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3380.36	233749.30

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3700.00	188222.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3700.00	188222.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3380.36	102249.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	350.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3380.36	101899.30

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

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

FOR LINE NUMBER: PAGE 6 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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 any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)  
**A. Larry Aubol**

Mailing Address 200 Farwell Drive

City State Zip Code  
Madison WI 53704

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

Name of Employer Occupation  
Self-Employed Business Owner

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2014  
**Transaction ID : C9540822A**

Amount of Each Receipt this Period  
200.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 390728

City State Zip Code  
Cambridge MA 02139-0008

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2014  
**Transaction ID : C9540822AB**

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

**A. AMSTED Industries Incorporated PAC (AMSTED PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Two Prudential Plaza  
 180 North Stetson Street Ste 1800  
 City CHICAGO State IL Zip Code 60601  
 FEC ID number of contributing federal political committee. **C** C00438358  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2014  
**Transaction ID : C9540826**  
 Amount of Each Receipt this Period  
 1500.00

**B. MMC CORP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10955 Lowell Ave  
 Ste 350  
 City Overland Park State KS Zip Code 66210-2408  
 FEC ID number of contributing federal political committee. **C** C00509356  
 Name of Employer Occupation  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 29 / 2014  
**Transaction ID : C9540825**  
 Amount of Each Receipt this Period  
 2000.00

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)  
**A. Tammy Baldwin Victory Committee**

Mailing Address 15 North Pinckney Street Suite 200

City MADISON State WI Zip Code 53703

FEC ID number of contributing federal political committee. **C** C00566133

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30514.56

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 12 / 29 / 2014

**Transaction ID : C9555317**

Amount of Each Receipt this Period  
 .  .  .  .  .  .  .  .  .  .  
 1700.05

Full Name (Last, First, Middle Initial)  
**B. Allied Pilots Association Political Action Committee**

Mailing Address 14600 Trinity Blvd Ste 500

City Fort Worth State TX Zip Code 76155-2559

FEC ID number of contributing federal political committee. **C** C00267849

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 10 / 2014

**Transaction ID : C9614894**

Amount of Each Receipt this Period  
 .  .  .  .  .  .  .  .  .  .  
 1000.00

**[MEMO ITEM]**  
\*

Full Name (Last, First, Middle Initial)  
**C. American Association of Clinical Endocrinologists INCPAC AACEPAC**

Mailing Address 245 Riverside Ave Suite 200

City Jacksonville State FL Zip Code 32202

FEC ID number of contributing federal political committee. **C** C00368365

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 04 / 2014

**Transaction ID : C9614893**

Amount of Each Receipt this Period  
 .  .  .  .  .  .  .  .  .  .  
 500.00

**[MEMO ITEM]**  
\*

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . 1700.05
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> . <input type="text"/> .



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

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

FOR LINE NUMBER: PAGE 9 OF 18  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)  
**A. Joseph North**

Mailing Address 6614 Van Winkle Dr

City Falls Church State VA Zip Code 22044-1010

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

Name of Employer Lockheed Martin Occupation Program Manager

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2014  
**Transaction ID : C9614892**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
\*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1700.05

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement  
credit card processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	1	4

Transaction ID : **D497973**

Amount of Each Disbursement this Period

9	.	8	8
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Category/  
Type

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement  
credit card processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	1	4

Transaction ID : **D497974**

Amount of Each Disbursement this Period

7	.	9	0
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Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Democratic Party of Wisconsin Federal Account**

Mailing Address 15 N. Pinckney  
Ste 200

City Madison State WI Zip Code 53703-3314

Purpose of Disbursement  
rent, telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	1	4

Transaction ID : **D497949**

Amount of Each Disbursement this Period

2	9	3	.	0	0
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Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	1	0	.	7	8
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)

**A. 15 N. Pinckney LLC**

Mailing Address 10 E Doty St  
Ste 200

City Madison State WI Zip Code 53703-3354

Purpose of Disbursement  
rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2014			

Transaction ID : D497950

Amount of Each Disbursement this Period

268.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Vocalocity**

Mailing Address 1375 Peachtree St NE  
Ste 200

City Atlanta State GA Zip Code 30309-3173

Purpose of Disbursement  
telephones

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2014			

Transaction ID : D497951

Amount of Each Disbursement this Period

25.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2014			

Transaction ID : D497952

Amount of Each Disbursement this Period

1026.32
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1026.32
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Fray Childers**

Mailing Address PO Box 482

City La Pointe State WI Zip Code 54850-0482

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2014

**Transaction ID : D497970**

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Katherine A Iliff**

Mailing Address 360 West Washington Ave  
#401

City Madison State WI Zip Code 53703

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2014

**Transaction ID : D497967**

Amount of Each Disbursement this Period

208.33

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
tax payments

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2014

**Transaction ID : D497953**

Amount of Each Disbursement this Period

78.86

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

**A. QTI Human Resources**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement benefit payments

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2014

Transaction ID : **D497954**

Amount of Each Disbursement this Period: 2.80

[MEMO ITEM]

**B. QTI Human Resources**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement payroll administration fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2014

Transaction ID : **D497955**

Amount of Each Disbursement this Period: 36.33

[MEMO ITEM]

**C. Ashley E Viste**

Full Name (Last, First, Middle Initial)

Mailing Address 933 Spaight St Apt 1

City Madison State WI Zip Code 53703-3587

Purpose of Disbursement payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2014

Transaction ID : **D497964**

Amount of Each Disbursement this Period: 500.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)

**A. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2014			

Transaction ID : **D497956**

Amount of Each Disbursement this Period

1026.31
---------

Full Name (Last, First, Middle Initial)

**B. Michael Fray Childers**

Mailing Address PO Box 482

City La Pointe State WI Zip Code 54850-0482

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2014			

Transaction ID : **D497971**

Amount of Each Disbursement this Period

200.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Katherine A Iliff**

Mailing Address 360 West Washington Ave  
#401

City Madison State WI Zip Code 53703

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2014			

Transaction ID : **D497968**

Amount of Each Disbursement this Period

208.33
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1026.31
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)

**A. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
tax payments

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2014

Transaction ID : D497957

Amount of Each Disbursement this Period

78.85

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
benefit payments

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2014

Transaction ID : D497958

Amount of Each Disbursement this Period

2.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
payroll administration fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2014

Transaction ID : D497959

Amount of Each Disbursement this Period

36.33

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)

**A. Ashley E Viste**

Mailing Address 933 Spaight St  
Apt 1

City Madison State WI Zip Code 53703-3587

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2014

Transaction ID : D497965

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2014

Transaction ID : D497960

Amount of Each Disbursement this Period

1016.95

Full Name (Last, First, Middle Initial)

**C. Michael Fray Childers**

Mailing Address PO Box 482

City La Pointe State WI Zip Code 54850-0482

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2014

Transaction ID : D497972

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1016.95



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine A Iliff**

Mailing Address 360 West Washington Ave  
#401

City Madison State WI Zip Code 53703

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
						2014							

Transaction ID : **D497969**

Amount of Each Disbursement this Period

2	0	8	.	3	3
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
tax payments

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
						2014							

Transaction ID : **D497961**

Amount of Each Disbursement this Period

6	9	.	4	9
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
benefit payments

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
						2014							

Transaction ID : **D497962**

Amount of Each Disbursement this Period

2	.	8	0
---	---	---	---

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

0	.	0	0
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0	.	0	0
---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**People's Voice PAC**

Full Name (Last, First, Middle Initial)

**A. QTI Human Resources**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701-0552

Purpose of Disbursement  
payroll administration fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : D497963

Amount of Each Disbursement this Period

36.33
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Ashley E Viste**

Mailing Address 933 Spaight St  
Apt 1

City Madison State WI Zip Code 53703-3587

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : D497966

Amount of Each Disbursement this Period

500.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

3380.36
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