

2011 JUL 11 AM 8:28

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.

12FE4M5

NORTH SHORE BANK PAC

ADDRESS (number and street)

115700 W BLUEMOUND RD

Check if different than previously reported. (ACC)

BROOKFIELD

WI

53005-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00205138

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:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day

Primary (12P)

General (12G)

Runoff (12R)

PRE-Election Report for the:

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

(d) 30-Day

General (30G)

Runoff (30R)

Special (30S)

POST-Election Report for the:

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

YYYY

through

MM / DD / YYYY

MM / DD / YYYY

YYYY

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 Nancy Lepic

Signature of Treasurer

*Nancy Lepic*

Date

MM / DD / YYYY

MM / DD / YYYY

YYYY

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

FEC FORM 3X  
Rev. 12/2004

11030622149

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**NORTH SHORE BANK PAC**

Report Covering the Period: From:

01 ' 01 ' 2011

To:

06 ' 30 ' 2011

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2011	3,257.40	3,257.40
(b) Cash on Hand at Beginning of Reporting Period.....	3,257.40	
(c) Total Receipts (from Line 19).....	24,500.00	24,500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5,707.40	5,707.40
7. Total Disbursements (from Line 31).....	4,500.00	4,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1,207.40	1,207.40
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

11030622150

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**NORTH SHORE BANK PAC**

Report Covering the Period: From:

01 / 01 / 2011

To:

06 / 30 / 2011

**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).....

245000

245000

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

245000

245000

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

245000

245000

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

245000

245000

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

245000

245000

1103062151

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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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 .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4,500.00	4,500.00
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4,500.00	4,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4,500.00	4,500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-**  
**penditures**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	245000	245000
34. Total Contribution Refunds (from Line 28(d)) .....	0	
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	245000	245000
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0	0

11030622153

**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	OF
	<input type="checkbox"/> 11a 13 <input type="checkbox"/> 11b 14 <input type="checkbox"/> 11c 15 <input type="checkbox"/> 12 16 <input type="checkbox"/> 17		

11030622154

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)  
**NORTH SHORE BANK PAC**

A. Full Name (Last, First, Middle Initial) <b>NAPOLEON, Edward S.</b>		Date of Receipt <b>05 / 13 / 2011</b>
Mailing Address <b>923 E. Kilbourn Ave Unit 1002</b>		Amount of Each Receipt this Period <b>300.00</b>
City <b>MILWAUKEE</b>	State Zip Code <b>WI 53202</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ <b>300.00</b>
Name of Employer <b>Retired</b>	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) <b>FLORSHEIM, JOHN W.</b>		Date of Receipt <b>05 / 13 / 2011</b>
Mailing Address <b>4407 N. LAKE DR.</b>		Amount of Each Receipt this Period <b>300.00</b>
City <b>MILWAUKEE</b>	State Zip Code <b>WI 53211</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ <b>300.00</b>
Name of Employer <b>WEXCO GROUP, INC</b>	Occupation <b>President</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) <b>MEI, Joseph</b>		Date of Receipt <b>05 / 13 / 2011</b>
Mailing Address <b>1420 Spring Dr.</b>		Amount of Each Receipt this Period <b>300.00</b>
City <b>BROOKFIELD</b>	State Zip Code <b>WI 53005</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ <b>300.00</b>
Name of Employer <b>Retired</b>	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<b>900.00</b>
TOTAL This Period (last page this line number only).....▶	

**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	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**North Shore Bank PAC**

11030622155

**A. Jones, Michael T.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**419 main st.**  
City  
**Delafield** State  
**WI** Zip Code  
**53018**

Date of Receipt  
**05 / 13 / 2011**

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

Amount of Each Receipt this Period  
**300.00**

Name of Employer  
**Miller Coors, LLC** Occupation  
**Senior Vice President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

**B. McKenna, Jay**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**2020 Bartlett Dr.**  
City  
**Brookfield** State  
**WI** Zip Code  
**53045**

Date of Receipt  
**05 / 10 / 2011**

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

Amount of Each Receipt this Period  
**500.00**

Name of Employer  
**North Shore Bank** Occupation  
**Chief Operating Officer**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

**C. Voell, Thomas**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**NU2 W30859 Shore Acres Rd.**  
City  
**Hartland** State  
**WI** Zip Code  
**53029**

Date of Receipt  
**06 / 06 / 2011**

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

Amount of Each Receipt this Period  
**300.00**

Name of Employer  
**Retired** Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

**SUBTOTAL of Receipts This Page (optional)** ..... ▶ **1100.00**

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

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

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

FOR LINE NUMBER:		PAGE		OF	
(check only one)					
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	12	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
North Shore Bank PAC

A. Full Name (Last, First, Middle Initial) Kellman, Michael		Date of Receipt 06 / 07 / 2011	
Mailing Address 14315 W. Meadowshire Ct.		Amount of Each Receipt this Period 150.00	
City New Berlin	State WI	Zip Code 53151	
FEC ID number of contributing federal political committee. C			
Name of Employer North Shore Bank	Occupation SVP Consumer Credit Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		

B. Full Name (Last, First, Middle Initial) Bender, Robert		Date of Receipt 06 / 17 / 2011	
Mailing Address W320 N16094 Shawmoors Dr.		Amount of Each Receipt this Period 300.00	
City Hartland	State WI	Zip Code 53029	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	2450.00

11030622156



**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)

PAGE OF

<input 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

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)  
**NORTH SHORE BANK PAC**

A. Full Name (Last, First, Middle Initial) <b>WIS BANK PAC</b>		Date of Disbursement <b>05 / 19 / 2011</b>
Mailing Address <b>P.O. BOX 8880</b>		Amount of Each Disbursement this Period <b>4,500.00</b>
City <b>Madison</b>	State <b>WI</b>	
Zip Code <b>53708</b>		
Purpose of Disbursement <b>Contribution</b>		Category/Type <b>011</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

B. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>4,500.00</b>
TOTAL This Period (last page this line number only).....▶	<b>4,500.00</b>

11030622157

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)  
7/5/11

USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
PREPARER

7/11/11  
DATE PREPARED

11030622158