

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Republican Party of Wisconsin

ADDRESS (number and street) 148 E. Johnson Street
 Check if different than previously reported. (ACC)
Madison WI 53703

2. **FEC IDENTIFICATION NUMBER** C00074450
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 Quarterly 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 **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2008 through 01 31 2008

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 Cathy Stepp

Signature of Treasurer Electronically Filed by Cathy Stepp Date 04 11 2008

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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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="center">133633.78</td></tr></table>	133633.78
Y	Y	Y	Y									
2	0	0	8									
133633.78												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="center">133633.78</td></tr></table>	133633.78										
133633.78												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="center">163889.50</td></tr></table>	163889.50	<table border="1" style="width: 100%;"><tr><td align="center">163889.50</td></tr></table>	163889.50								
163889.50												
163889.50												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="center">297523.28</td></tr></table>	297523.28	<table border="1" style="width: 100%;"><tr><td align="center">297523.28</td></tr></table>	297523.28								
297523.28												
297523.28												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="center">133565.75</td></tr></table>	133565.75	<table border="1" style="width: 100%;"><tr><td align="center">133565.75</td></tr></table>	133565.75								
133565.75												
133565.75												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="center">163957.53</td></tr></table>	163957.53	<table border="1" style="width: 100%;"><tr><td align="center">163957.53</td></tr></table>	163957.53								
163957.53												
163957.53												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="center">26543.70</td></tr></table>	26543.70										
26543.70												

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**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	47403.00	47403.00
(i) Itemized (use Schedule A)	109951.86	109951.86
(ii) Unitemized	157354.86	157354.86
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	6000.00	6000.00
(c) Other Political Committees (such as PACs)	163354.86	163354.86
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
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)	534.64	534.64
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 Transfer (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))	163889.50	163889.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	163889.50	163889.50

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	5995.76	5995.76
(ii) Non-Federal Share.....	15417.68	15417.68
(b) Other Federal Operating Expenditures.....	60488.51	60488.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	81901.95	81901.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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	51663.80	51663.80
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	51663.80	51663.80
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	133565.75	133565.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	118148.07	118148.07

DETAILED SUMMARY PAGE
of Disbursements

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	163354.86	163354.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	163354.86	163354.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	66484.27	66484.27
37. Offsets to Operating Expenditures (from Line 15, page 3)	534.64	534.64
38. Net Operating Expenditures (subtract Line 37 from Line 36)	65949.63	65949.63

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 6 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) James Allen		Date of Receipt
	Mailing Address S3 W31343 Walnut Hollow		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 1 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Delafield	WI	53018
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30465
Name of Employer Allen Management Inc.		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Charlotte Bernhardt		Date of Receipt
	Mailing Address 11733 W Watertown Park Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 1 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Milwaukee	WI	53226
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30467
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			Contribution

C.	Full Name (Last, First, Middle Initial) J. Borden		Date of Receipt
	Mailing Address PO Box 591		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 1 / 2 5 / 2 0 0 8
	City	State	Zip Code
	Janesville	WI	53545
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30468
Name of Employer HUF COR, Inc		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<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 7 / 72
(check only one)

<input checked="" 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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Lisa Buestrin

Mailing Address 1000 W Calumet Rd

City State Zip Code
River Hills WI 53217

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Occupation Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 14 / 2008

Transaction ID: SA11AI.30470

Amount of Each Receipt this Period 500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Mary Buestrin

Mailing Address 13259 N Lakewood Dr #3W

City State Zip Code
Mequon WI 53097

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Coalition for WI Exec. Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 16 / 2008

Transaction ID: SA11AI.30471

Amount of Each Receipt this Period 500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Mary Buestrin

Mailing Address 13259 N Lakewood Dr #3W

City State Zip Code
Mequon WI 53097

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Coalition for WI Exec. Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 29 / 2008

Transaction ID: SA11AI.30472

Amount of Each Receipt this Period 100.00

Contribution

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 8 / 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Robert Bush

Mailing Address 420 S. Washington St.

City State Zip Code
Green Bay WI 54301

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 25 / 2008
Transaction ID: SA11AI.30473

Amount of Each Receipt this Period 1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
James Callan

Mailing Address 1711 E Dean Rd

City State Zip Code
Milwaukee WI 53217

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
James L Callan Inc Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 01 / 15 / 2008
Transaction ID: SA11AI.30474

Amount of Each Receipt this Period 2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Carol Carpenter

Mailing Address 656 Evergreen Ct.

City State Zip Code
Bayside WI 53217

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Audubon Court Books Book Seller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 18 / 2008
Transaction ID: SA11AI.30475

Amount of Each Receipt this Period 500.00

Contribution

SUBTOTAL of Receipts This Page (optional) 4000.00

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: (check only one)	PAGE 9 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Carol Carpenter		Date of Receipt
	Mailing Address 656 Evergreen Ct.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Bayside	WI	53217
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30476
Name of Employer Audubon Court Books		Occupation Book Seller	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Mark Cullen		Date of Receipt
	Mailing Address 220 Jefferson St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Janesville	WI	53547
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30478
Name of Employer J.P. cullen, Inc.		Occupation Contractor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
			Contribution

C.	Full Name (Last, First, Middle Initial) Randy Dippel		Date of Receipt
	Mailing Address 4938 County Trunk U		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 0 7 / 2 0 0 8
	City	State	Zip Code
	Glenbeulah	WI	53023
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30481
Name of Employer Schultz & Dippel Trucking, Inc		Occupation Driver	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5750.00
TOTAL This Period (last page this line number only)	<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 10 / 72
(check only one)

<input checked="" 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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Wolfgang Dorner

Mailing Address PO Box 655

City Hartland State WI Zip Code 53029

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

Name of Employer Dorner Mfg. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.30561

Amount of Each Receipt this Period
200.00

Best Efforts Compliance

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
James Fitzgerald

Mailing Address 420 Oak Rd

City Janesville State WI Zip Code 53545-4134

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

Name of Employer F-W Oil Company/COB Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.30482

Amount of Each Receipt this Period
5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Gerald Foster

Mailing Address 140 Ridge Rd

City Walworth State WI Zip Code 53184

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.30558

Amount of Each Receipt this Period
100.00

Best Efforts Compliance

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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: (check only one)	PAGE 11 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Richard Grossman	Date of Receipt MM / DD / YYYY 01 / 22 / 2008
	Mailing Address 11702 W Mequon Road 112N	Transaction ID: SA11AI.30483
	City State Zip Code Mequon WI 53097	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Kromer Cap Co., Inc. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Dennis Hansch	Date of Receipt MM / DD / YYYY 11 / 19 / 2007
	Mailing Address 2515 Chicksaw Dr	Transaction ID: SA11AI.30564
	City State Zip Code Janesville WI 53545	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Best Efforts Compliance
	Name of Employer Occupation Nowlan & Mouat LLP Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) John Hanson	Date of Receipt MM / DD / YYYY 01 / 17 / 2008
	Mailing Address 948 Hanson Drive	Transaction ID: SA11AI.30485
	City State Zip Code River Falls WI 54022	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
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: (check only one)	PAGE 12 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Maureen Harder		Date of Receipt
	Mailing Address 441 Wildwood Rdg		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Colgate	WI	53017
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer none		Occupation Housewife	Transaction ID: SA11AI.30486
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="300.00"/>
			Contribution

B.	Full Name (Last, First, Middle Initial) C. Hagen Harker		Date of Receipt
	Mailing Address 202 Jefferson Ave		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Janesville	WI	53545
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Mid-States Concrete Industries		Occupation President	Transaction ID: SA11AI.30559
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value=".00"/>	<input type="text" value="250.00"/>
			Best Efforts Compliance
			[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) John Haskins		Date of Receipt
	Mailing Address 610 N Washington St		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Naperville	IL	60563
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Majestic View Dairy		Occupation Investor	Transaction ID: SA11AI.30487
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only)	<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: (check only one)	PAGE 13 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Gerald Hay	Date of Receipt MM / DD / YYYY 12 / 03 / 2007
	Mailing Address 7920 W South County Line Rd	Transaction ID: SA11AI.30565
	City State Zip Code Franksville WI 53124	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Best Efforts Compliance
Name of Employer Self Employed	Occupation Information requested	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B.	Full Name (Last, First, Middle Initial) James Heller	Date of Receipt MM / DD / YYYY 01 / 15 / 2008
	Mailing Address PO Box 240181	Transaction ID: SA11AI.30488
	City State Zip Code Milwaukee WI 53224	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) John Hendee	Date of Receipt MM / DD / YYYY 01 / 25 / 2008
	Mailing Address 5339 N. Hwy 83	Transaction ID: SA11AI.30489
	City State Zip Code Hartland WI 53029	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Retired	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
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: (check only one)	PAGE 14 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Robert Hering	Date of Receipt MM / DD / YYYY 01 / 02 / 2008
	Mailing Address 484 Rainbow Beach Road	Transaction ID: SA11AI.30490
	City State Zip Code Neenah WI 54956	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Self Occupation Dentist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Carole Houston	Date of Receipt MM / DD / YYYY 01 / 31 / 2008
	Mailing Address 625 Park Circle	Transaction ID: SA11AI.30491
	City State Zip Code Elm Grove WI 53122	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Retired Occupation Retired 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) Burleigh Jacobs	Date of Receipt MM / DD / YYYY 01 / 14 / 2008
	Mailing Address 1020 Madera Circle	Transaction ID: SA11AI.30492
	City State Zip Code Elm Grove WI 53122	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	1550.00
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: (check only one)	PAGE 15 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Gerald Jensen		Date of Receipt
	Mailing Address 869 Glenway Rc		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Oregon	WI	53575
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Information requested		Occupation	Transaction ID: SA11AI.30493
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	
		Contribution	

B.	Full Name (Last, First, Middle Initial) Paul Jones		Date of Receipt
	Mailing Address 7950 N Lake Dr		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Bayside	WI	53217
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Information requested		Occupation Information requested	Transaction ID: SA11AI.30494
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="500.00"/>	
		Contribution	

C.	Full Name (Last, First, Middle Initial) E. T. Juday		Date of Receipt
	Mailing Address PO Box 387		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Land O Lakes	WI	54540
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation Retired	Transaction ID: SA11AI.30496
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	
		Contribution	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<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: (check only one)	PAGE 16 / 72
	<input checked="" 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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Margaret Junker	Date of Receipt MM / DD / YYYY 01 / 28 / 2008
	Mailing Address 5717 N. Ames Terrace	Transaction ID: SA11AI.30497
	City State Zip Code Glendale WI 53209	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Retired Occupation Educator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) Stephen King	Date of Receipt MM / DD / YYYY 01 / 25 / 2008
	Mailing Address P.O. Box 366	Transaction ID: SA11AI.30500
	City State Zip Code Milton WI 53563	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Tomah Products Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

C.	Full Name (Last, First, Middle Initial) Herbert Kohler, Jr.	Date of Receipt MM / DD / YYYY 01 / 02 / 2008
	Mailing Address 441 Greentree Road	Transaction ID: SA11AI.30502
	City State Zip Code Kohler WI 53044	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Kohler Company Occupation C.O.B., C.E.O. & President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	▶	3800.00
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 17 / 72
(check only one)

<input checked="" 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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Henry Loos

Mailing Address 2159 W Hidden Reserve Ct

City State Zip Code
Mequon WI 53092

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

Name of Employer Occupation
Quarles & Brady Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 16 / 2008

Transaction ID: SA11AI.30504

Amount of Each Receipt this Period
500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
John Lunenschloss

Mailing Address 3300 Commercial Avenue

City State Zip Code
Madison WI 53714

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

Name of Employer Occupation
AIR-LEC Industries, Inc. Manufacturer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2008

Transaction ID: SA11AI.30505

Amount of Each Receipt this Period
500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Michael Martin

Mailing Address W8485 Trillium Ln

City State Zip Code
Antigo WI 54409

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

Name of Employer Occupation
Allied Insurance Center Insurance Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 02 / 2008

Transaction ID: SA11AI.30506

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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: (check only one)	PAGE 18 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Michael Martin		Date of Receipt
	Mailing Address W8485 Trillium Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 2 5 / 2 0 0 8
	City	State	Zip Code
	Antigo	WI	54409
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Allied Insurance Center		Occupation Insurance Sales	Transaction ID: SA11AI.30507
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 400.00	<input type="text"/> 150.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Audrey McClellan		Date of Receipt
	Mailing Address 2009 N Parker Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 0 / 2 0 0 7
	City	State	Zip Code
	Janesville	WI	53545
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer N/A		Occupation Retired	Transaction ID: SA11AI.30556
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> .00	<input type="text"/> 20.00
			Best Efforts Compliance
			[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) J Miller		Date of Receipt
	Mailing Address 4933 Evergreen Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 7 / 2 0 0 8
	City	State	Zip Code
	Sheboygan	WI	53081
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Miller Engineers & Scientists		Occupation Civ. Engr.	Transaction ID: SA11AI.30511
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 303.00	<input type="text"/> 103.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 253.00
TOTAL This Period (last page this line number only)	<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: (check only one)	PAGE 19 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) J Miller	Date of Receipt MM / DD / YYYY 01 / 29 / 2008
	Mailing Address 4933 Evergreen Drive	Transaction ID: SA11AI.30512
	City State Zip Code Sheboygan WI 53081	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Miller Engineers & Scientists Occupation Civ. Engr. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 403.00	

B.	Full Name (Last, First, Middle Initial) Paul Miller	Date of Receipt MM / DD / YYYY 01 / 28 / 2008
	Mailing Address 6722 Sullivan Way	Transaction ID: SA11AI.30513
	City State Zip Code Alexandria VA 22315	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer information requested Occupation information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Michael Nelms	Date of Receipt MM / DD / YYYY 01 / 28 / 2008
	Mailing Address 1129 26 3/4th Ave	Transaction ID: SA11AI.30517
	City State Zip Code Cumberland WI 54829	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Self Occupation Flight Instructor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	600.00
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 20 / 72
(check only one)

<input checked="" 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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Mark Nelson

Mailing Address 14175 Golf Parkway

City State Zip Code
Brookfield WI 53005

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.30518

Amount of Each Receipt this Period
250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Milton Neshek

Mailing Address 1335 North Geneva National Avenue

City State Zip Code
Lake Geneva WI 53147

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

Name of Employer Milton E. Neshek, LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.30519

Amount of Each Receipt this Period
500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Albert Nicholas

Mailing Address 6002 N. Hwy 83

City State Zip Code
Hartland WI 53029

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

Name of Employer Nicholas Company, Inc Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.30520

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **5750.00**

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: (check only one)	PAGE 21 / 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Thomas Nichols	Date of Receipt MM / DD / YYYY 01 / 23 / 2008
	Mailing Address 111 E Kilbourn Ave, 19th Fl	Transaction ID: SA11AI.30521
	City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Meissner, Tierney, Fisher Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Daniel Olszewski	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address 9815 Fallen Leaf Dr	Transaction ID: SA11AI.30523
	City State Zip Code Middleton WI 53562	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Katon Corp CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Christopher Owen	Date of Receipt MM / DD / YYYY 01 / 16 / 2008
	Mailing Address 4294 E Ullan Rd	Transaction ID: SA11AI.30524
	City State Zip Code Superior WI 54880-8078	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation N/A Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
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: (check only one)	PAGE 22 / 72
	<input checked="" 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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) John Parker	Date of Receipt MM / DD / YYYY 01 / 08 / 2008
	Mailing Address 1380 W Wisconsin Ave Apt 117	Transaction ID: SA11AI.30525
	City State Zip Code Oconomowoc WI 53066	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ronald Perri	Date of Receipt MM / DD / YYYY 01 / 11 / 2008
	Mailing Address PO Box 804	Transaction ID: SA11AI.30526
	City State Zip Code Brookfield WI 53008-0804	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer McIver Electric Occupation Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Richard Piagentini	Date of Receipt MM / DD / YYYY 12 / 13 / 2007
	Mailing Address 225 Somerset Glenn	Transaction ID: SA11AI.30562
	City State Zip Code Wales WI 53183	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Best Efforts Compliance
	Name of Employer Self Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	500.00
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 23 / 72

(check only one)

<input checked="" 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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Maurice Reese

Mailing Address 713 Lakewood Boulevard

City State Zip Code
Madison WI 53704

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 01 / 08 / 2008

Transaction ID: SA11AI.30528

Amount of Each Receipt this Period 1250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Marjorie Reinhart

Mailing Address 201 Main St STE 800

City State Zip Code
La Crosse WI 54602

FEC ID number of contributing federal political committee. C

Name of Employer Reinhart Corporation Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 02 / 2008

Transaction ID: SA11AI.30529

Amount of Each Receipt this Period 500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Ronald Reinke

Mailing Address 3830 E Oakwood Dr

City State Zip Code
Oak Creek WI 53154

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 28 / 2008

Transaction ID: SA11AI.30530

Amount of Each Receipt this Period 250.00

Contribution

SUBTOTAL of Receipts This Page (optional) 2000.00

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 24 / 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Charles Roy

Mailing Address 14245 Heatherwood Ct

City Elm Grove State WI Zip Code 53122

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

Name of Employer Rexnord Corp Occupation VP Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 08 / 2008
Transaction ID: SA11AI.30531
 Amount of Each Receipt this Period 1000.00
 Contribution

B. Full Name (Last, First, Middle Initial)
John Savage

Mailing Address 1610 N. Prospect #203

City Milwaukee State WI Zip Code 53202

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

Name of Employer Self Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 08 / 2008
Transaction ID: SA11AI.30532
 Amount of Each Receipt this Period 500.00
 Contribution

C. Full Name (Last, First, Middle Initial)
John Savage

Mailing Address 1610 N. Prospect #203

City Milwaukee State WI Zip Code 53202

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

Name of Employer Self Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 01 / 25 / 2008
Transaction ID: SA11AI.30533
 Amount of Each Receipt this Period 300.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 1800.00

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 25 / 72

(check only one)

<input checked="" 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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Joan Schorsch

Mailing Address 1019 Hunter Dr, Unit 64

City State Zip Code
Racine WI 53406

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Housewife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt MM / DD / YYYY
12 / 17 / 2007

Transaction ID: SA11AI.30563

Amount of Each Receipt this Period 250.00

Best Efforts Compliance

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
John Sensenbrenner

Mailing Address 909 East Forest Avenue

City State Zip Code
Neenah WI 54956

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
01 / 14 / 2008

Transaction ID: SA11AI.30534

Amount of Each Receipt this Period 250.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Barbara Smith

Mailing Address 3222 E Hampshire Ave

City State Zip Code
Milwaukee WI 53211-3118

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
01 / 25 / 2008

Transaction ID: SA11AI.30535

Amount of Each Receipt this Period 500.00

Contribution

SUBTOTAL of Receipts This Page (optional) 750.00

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 26 / 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Trygve Solberg

Mailing Address PO Box 50

City State Zip Code
Minocqua WI 54548

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

Name of Employer Occupation
TA Solberg Company, Inc Grocer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2008

Transaction ID: SA11AI.30537

Amount of Each Receipt this Period
1250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Michael Staebell

Mailing Address W176 S7515 Harbor Circle

City State Zip Code
Muskego WI 53150

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2007

Transaction ID: SA11AI.30560

Amount of Each Receipt this Period
100.00

Best Efforts Compliance

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Alice Stayer

Mailing Address 522 Lake Louise Circle

City State Zip Code
Naples FL 34110

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

Name of Employer Occupation
Information requested Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 14 / 2008

Transaction ID: SA11AI.30538

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 27 / 72
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Rita Stilin
Mailing Address 72303 Pufal Rd
City High Bridge State WI Zip Code 54846
FEC ID number of contributing federal political committee. **C**
Name of Employer North Country Lumber Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt MM / DD / YYYY
01 / 02 / 2008
Transaction ID: SA11AI.30540
Amount of Each Receipt this Period 1000.00
Contribution

B. Full Name (Last, First, Middle Initial)
Frederick Stratton
Mailing Address 9608 N Juniper Circle
City Mequon State WI Zip Code 53092
FEC ID number of contributing federal political committee. **C**
Name of Employer Briggs & Stratton Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt MM / DD / YYYY
01 / 03 / 2008
Transaction ID: SA11AI.30541
Amount of Each Receipt this Period 500.00
Contribution

C. Full Name (Last, First, Middle Initial)
Don Taylor
Mailing Address S23 W27100 Shanangi Lane
City Waukesha State WI Zip Code 53188
FEC ID number of contributing federal political committee. **C**
Name of Employer Waukesha State Bank Occupation Banker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt MM / DD / YYYY
01 / 08 / 2008
Transaction ID: SA11AI.30542
Amount of Each Receipt this Period 250.00
Contribution

SUBTOTAL of Receipts This Page (optional) 1750.00
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 28 / 72
(check only one)

<input checked="" 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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial) Howard Uecker		Date of Receipt MM / DD / YYYY 12 / 27 / 2007
Mailing Address 35380 Pabst Ct		Transaction ID: SA11AI.30557
City Oconomowoc	State WI	Zip Code 53066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Roehl Corporation	Occupation Food Broker	Best Efforts Compliance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial) Margery Uihlein		Date of Receipt MM / DD / YYYY 01 / 23 / 2008
Mailing Address 268 Green Bay Rd		Transaction ID: SA11AI.30543
City Cedarburg	State WI	Zip Code 53012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Marie Uihlein		Date of Receipt MM / DD / YYYY 01 / 31 / 2008
Mailing Address 1201 W Dean Road		Transaction ID: SA11AI.30544
City Milwaukee	State WI	Zip Code 53217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Homemaker	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	500.00
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 29 / 72
	(check only one)	
<input checked="" 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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial) Richard Von Haden		Date of Receipt MM / DD / YYYY 01 / 25 / 2008
Mailing Address N4W31933 White Tail Run		Transaction ID: SA11AI.30549
City Delafield	State WI	Zip Code 53018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Northwestern Mutual Life	Occupation RE investments	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Mr. James Wiechmann		Date of Receipt MM / DD / YYYY 01 / 28 / 2008
Mailing Address 2769 N Summit Ave		Transaction ID: SA11AI.30551
City Milwaukee	State WI	Zip Code 53211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Broker	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	47403.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 72
	(check only one)
<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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Milwaukee Police Association		Date of Receipt
	Mailing Address 1840 North Farwell Avenue		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Milwaukee	WI	53202
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11C.30555
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Contribution

B.	Full Name (Last, First, Middle Initial) WPS RESOURCES CORPORATION RESPONSIBLE GOVERNMENT COMMITTEE		Date of Receipt
	Mailing Address PO BOX 19002 PO BOX 19002		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	GREEN BAY	WI	54307
	FEC ID number of contributing federal political committee. <input type="text" value="C C00107813"/>		Transaction ID: SA11C.30553
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="6000.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 31 / 72	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service		Date of Receipt																					
	Mailing Address P.O. Box 5066		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		3	1		2	0	0	8														
	City State Zip Code Milwaukee WI 53201-5066		Transaction ID: SA15.30547																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 534.64																					
Name of Employer Occupation		Postage reimbursement																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 534.64																						

SUBTOTAL of Receipts This Page (optional)	▶	534.64
TOTAL This Period (last page this line number only)	▶	534.64

**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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) American Association of Notaries	Transaction ID: SB21B.30633 Date of Disbursement																			
	Mailing Address 8811 Westheimer #207	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	0		2	0	0	8												
	City Houston State TX Zip Code 77063	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office supplies	<table border="1"><tr><td>59.85</td></tr></table>	59.85																		
59.85																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		[MEMO ITEM]																			

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.30686 Date of Disbursement																			
	Mailing Address PO Box 9001309	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	0	8												
	City Louisville State KY Zip Code 40290-1309	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Long distance	<table border="1"><tr><td>1952.00</td></tr></table>	1952.00																		
1952.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Avenue Bar	Transaction ID: SB21B.30638 Date of Disbursement																			
	Mailing Address 1128 East Washington Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	6		2	0	0	7												
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Staff meal	<table border="1"><tr><td>71.00</td></tr></table>	71.00																		
71.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		[MEMO ITEM]																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1952.00</td></tr></table>	1952.00
1952.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Dept. of Workforce Development</p> <p>Mailing Address PO Box 78960</p> <p>City Milwaukee State WI Zip Code 53278</p> <p>Purpose of Disbursement Unemployment tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30580</p> <p>Date of Disbursement 01 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 211.38</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Heartland Litho</p> <p>Mailing Address 2087 Atwood Avenue</p> <p>City Madison State WI Zip Code 53704</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30570</p> <p>Date of Disbursement 01 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 1305.04</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Heinzen Printing Inc.</p> <p>Mailing Address P.O. Box 267</p> <p>City Marshfield State WI Zip Code 54449</p> <p>Purpose of Disbursement Label printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30691</p> <p>Date of Disbursement 01 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 219.73</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1736.15

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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Hilton Hotels Washington DC

Mailing Address 1919 Connecticut Avenue NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Staff room rental - not FEA

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.30639
Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

233.58

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Janesville Country Club

Mailing Address PO Box 267

City Janesville State WI Zip Code 53547

Purpose of Disbursement
Refreshments

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.30571
Date of Disbursement

01 / 02 / 2008

Amount of Each Disbursement this Period

738.39

C.

Full Name (Last, First, Middle Initial)
Juston Johnson

Mailing Address 820 Williamson Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.30598
Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

1314.66

SUBTOTAL of Disbursements This Page (optional)

2053.05

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)
Republican Party of Wisconsin

<p>A. Full Name (Last, First, Middle Initial) Kalahari Resort & Convention Center</p> <p>Mailing Address PO Box 590</p> <p>City Wisconsin Dells State WI Zip Code 53965</p> <p>Purpose of Disbursement Hotel room deposit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30631 Date of Disbursement 01 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) La Quinta Inns Sheboygan</p> <p>Mailing Address 2932 Kohler Memorial Dr</p> <p>City Sheboygan State WI Zip Code 53081</p> <p>Purpose of Disbursement Staff room rental - not FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30644 Date of Disbursement 12 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 66.67</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center</p> <p>Mailing Address PO Box 3052</p> <p>City Milwaukee State WI Zip Code 53201</p> <p>Purpose of Disbursement Credit card finance charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30635 Date of Disbursement 12 / 10 / 2007</p> <p>Amount of Each Disbursement this Period 31.31</p> <p>[MEMO ITEM]</p>

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)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
M&I Bank Credit Card Processing Center

Mailing Address PO Box 3052

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Credit card finance charge

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.30622

Date of Disbursement

01 / 10 / 2008

Amount of Each Disbursement this Period

67.30

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
M&I Bank Credit Card Processing Center

Mailing Address PO Box 3052

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Credit card payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.30621

Date of Disbursement

01 / 23 / 2008

Amount of Each Disbursement this Period

4374.51

C. Full Name (Last, First, Middle Initial)
M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement
Interest on LOC

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.30702

Date of Disbursement

01 / 31 / 2008

Amount of Each Disbursement this Period

165.71

SUBTOTAL of Disbursements This Page (optional) ▶

4540.22

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)
Republican Party of Wisconsin

<p>A. Full Name (Last, First, Middle Initial) M&I Merchant Services</p> <p>Mailing Address P.O. Box 5920</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement Credit card processing fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30581</p> <p>Date of Disbursement 01 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 664.76</p>
<p>B. Full Name (Last, First, Middle Initial) M&I Merchant Services</p> <p>Mailing Address P.O. Box 5920</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement credit card processing fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30703</p> <p>Date of Disbursement 01 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 12.95</p>
<p>C. Full Name (Last, First, Middle Initial) Kathryn Mize</p> <p>Mailing Address 414 N Livingston Street #2</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Expense Reimbursement - refreshments</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.30652</p> <p>Date of Disbursement 01 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 167.33</p>

SUBTOTAL of Disbursements This Page (optional) ▶

845.04

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)

PAGE 38 / 72

<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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.30636 Date of Disbursement 11 / 14 / 2007
	Mailing Address #774100, 4100 Solutions Center	Amount of Each Disbursement this Period 19.95
	City Chicago State IL Zip Code 60677-4001	
	Purpose of Disbursement credit card processing fee	[MEMO ITEM]
	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) Paypal, Inc.	Transaction ID: SB21B.30624 Date of Disbursement 12 / 12 / 2007
	Mailing Address #774100, 4100 Solutions Center	Amount of Each Disbursement this Period 19.95
	City Chicago State IL Zip Code 60677-4001	
	Purpose of Disbursement credit card processing fee	[MEMO ITEM]
	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) Pizza Extreme	Transaction ID: SB21B.30625 Date of Disbursement 12 / 11 / 2007
	Mailing Address 605 E Washington Ave	Amount of Each Disbursement this Period 49.73
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Staff food	[MEMO ITEM]
	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)	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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) PostMaster	Transaction ID: SB21B.30637 Date of Disbursement
	Mailing Address PO Box 7005	<input type="text" value="11"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Madison State WI Zip Code 53707	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="85.85"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) PostMaster	Transaction ID: SB21B.30641 Date of Disbursement
	Mailing Address PO Box 7005	<input type="text" value="11"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Madison State WI Zip Code 53707	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="451.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) PostMaster	Transaction ID: SB21B.30568 Date of Disbursement
	Mailing Address PO Box 7005	<input type="text" value="01"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Madison State WI Zip Code 53707	Amount of Each Disbursement this Period
	Purpose of Disbursement Business reply mail	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) PostMaster Mailing Address PO Box 7005 City Madison State WI Zip Code 53707 Purpose of Disbursement Business reply mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.30620 Date of Disbursement MM / DD / YYYY 01 / 22 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Radisson Hotel Milwaukee Mailing Address 7065 N Port Washington Rd City Milwaukee State WI Zip Code 53217 Purpose of Disbursement Room rental and food - not FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.30623 Date of Disbursement MM / DD / YYYY 12 / 11 / 2007
	Amount of Each Disbursement this Period 2413.93
	Category/ Type
	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Rosario's LLC Mailing Address 6001 Monona Dr City Monona State WI Zip Code 53716 Purpose of Disbursement Staff party Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.30627 Date of Disbursement MM / DD / YYYY 12 / 19 / 2007
	Amount of Each Disbursement this Period 213.29
	Category/ Type
	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Mary Stitt	Transaction ID: SB21B.30664
	Mailing Address 1478 Noridge Trail	Date of Disbursement 01 / 30 / 2008
	City Port Washington State WI Zip Code 53074	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Fundraising consulting	Category/Type
	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) Mary Stitt	Transaction ID: SB21B.30704
	Mailing Address 1478 Noridge Trail	Date of Disbursement 01 / 30 / 2008
	City Port Washington State WI Zip Code 53074	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Fundraising consulting	Category/Type
	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) T3E Company Inc.	Transaction ID: SB21B.30629
	Mailing Address 7412 SW Beaverton - Hillsdale Hwy Suite 210	Date of Disbursement 01 / 03 / 2008
	City Portland State OR Zip Code 97225	Amount of Each Disbursement this Period 171.95
	Purpose of Disbursement Headset	Category/Type
	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:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	3500.00
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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) The Old Fashioned	Transaction ID: SB21B.30632 Date of Disbursement
	Mailing Address 23 N. Pinckney St.	<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period
	Purpose of Disbursement Staff meal	<input type="text" value="73.89"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.30577 Date of Disbursement
	Mailing Address 925 Harrington Drive	<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City Madison State WI Zip Code 53718	Amount of Each Disbursement this Period
	Purpose of Disbursement Finance mailing - not FEA	<input type="text" value="10000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.30590 Date of Disbursement
	Mailing Address 925 Harrington Drive	<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City Madison State WI Zip Code 53718	Amount of Each Disbursement this Period
	Purpose of Disbursement Finance mailing - not FEA	<input type="text" value="3100.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="13100.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.30700 Date of Disbursement 01 / 31 / 2008
	Mailing Address 925 Harrington Drive	Amount of Each Disbursement this Period 29926.30
	City Madison State WI Zip Code 53718	
	Purpose of Disbursement Finance mailing - not FEA Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) University Book Store	Transaction ID: SB21B.30642 Date of Disbursement 11 / 28 / 2007
	Mailing Address 702 N. Midvale Blvd.	Amount of Each Disbursement this Period 45.26
	City Madison State WI Zip Code 53705	
	Purpose of Disbursement Envelopes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue	Transaction ID: SB21B.30646 Date of Disbursement 01 / 23 / 2008
	Mailing Address PO Box 93208	Amount of Each Disbursement this Period 10.00
	City Milwaukee State WI Zip Code 53293	
	Purpose of Disbursement Registration fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

29936.30

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)

PAGE 44 / 72

<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)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Wisc. Dept of Revenue - Sls Tax

Mailing Address PO Box 93389

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement
Sales/use tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.30658

Date of Disbursement

01 / 30 / 2008

Amount of Each Disbursement this Period

438.21

SUBTOTAL of Disbursements This Page (optional)

438.21

TOTAL This Period (last page this line number only)

60100.97

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.30583 Date of Disbursement
	Mailing Address PO Box 6164	<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee Simple IRA	<input type="text" value="790.47"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.30663 Date of Disbursement
	Mailing Address PO Box 6164	<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee Simple IRA	<input type="text" value="893.62"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dudley Bowlby	Transaction ID: SB30B.30606 Date of Disbursement
	Mailing Address 250 Femrite Drive	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Madison State WI Zip Code 53716	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="532.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

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)

PAGE 47 / 72

<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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Dean Care	Transaction ID: SB30B.30653 Date of Disbursement 01 / 30 / 2008
	Mailing Address PO Box 88610	Amount of Each Disbursement this Period 2905.17
	City Milwaukee State WI Zip Code 53288	
	Purpose of Disbursement Health insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Delta Dental	Transaction ID: SB30B.30654 Date of Disbursement 01 / 30 / 2008
	Mailing Address PO Box 828	Amount of Each Disbursement this Period 437.33
	City Stevens Point State WI Zip Code 54481	
	Purpose of Disbursement Dental insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.30608 Date of Disbursement 01 / 15 / 2008
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 1139.12
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4481.62
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Richard Dickie

Transaction ID: SB30B.30676
Date of Disbursement

Mailing Address 126 North Blair Street #1

/ /

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Guardian

Transaction ID: SB30B.30655
Date of Disbursement

Mailing Address PO Box 95101

/ /

City Chicago State IL Zip Code 60694

Amount of Each Disbursement this Period

Purpose of Disbursement
Life insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Donna Heimbach

Transaction ID: SB30B.30610
Date of Disbursement

Mailing Address 3002 Dianne Drive

/ /

City Middleton State WI Zip Code 53562

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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)

PAGE 49 / 72

<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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Donna Heimbach Mailing Address 3002 Dianne Drive City Middleton State WI Zip Code 53562 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30677 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8	Amount of Each Disbursement this Period 897.74
B.	Full Name (Last, First, Middle Initial) IRS Mailing Address Payment Center City Kansas City State MO Zip Code 64999 Purpose of Disbursement Payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30616 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8	Amount of Each Disbursement this Period 5349.40
C.	Full Name (Last, First, Middle Initial) IRS Mailing Address Payment Center City Kansas City State MO Zip Code 64999 Purpose of Disbursement Unemployment tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30618 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8	Amount of Each Disbursement this Period 10.16

SUBTOTAL of Disbursements This Page (optional)	6257.30
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Juston Johnson

Transaction ID: SB30B.30666
Date of Disbursement

Mailing Address 820 Williamson Street

/ /

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Kyle Johnson

Transaction ID: SB30B.30667
Date of Disbursement

Mailing Address 210 N Charter #504

/ /

City Madison State WI Zip Code 53715

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Brian Kind

Transaction ID: SB30B.30600
Date of Disbursement

Mailing Address 405 Doral Court

/ /

City Waunakee State WI Zip Code 53597

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Brian Kind	Transaction ID: SB30B.30668
	Mailing Address 405 Doral Court	Date of Disbursement 01 / 31 / 2008
	City Waunakee State WI Zip Code 53597	Amount of Each Disbursement this Period 1626.91
	Purpose of Disbursement Payroll	Category/Type
	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) Kirsten Kukowski	Transaction ID: SB30B.30601
	Mailing Address 3029 Maple Valley Drive #201	Date of Disbursement 01 / 15 / 2008
	City Madison State WI Zip Code 53719	Amount of Each Disbursement this Period 1157.27
	Purpose of Disbursement Payroll	Category/Type
	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) Kirsten Kukowski	Transaction ID: SB30B.30669
	Mailing Address 3029 Maple Valley Drive #201	Date of Disbursement 01 / 31 / 2008
	City Madison State WI Zip Code 53719	Amount of Each Disbursement this Period 1256.28
	Purpose of Disbursement Payroll	Category/Type
	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)	▶	4040.46
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Larry Loomis <hr/> Mailing Address 3157 Muir Field Road #47 <hr/> City Madison State WI Zip Code 53719 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30611 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 315.96
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Larry Loomis <hr/> Mailing Address 3157 Muir Field Road #47 <hr/> City Madison State WI Zip Code 53719 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30678 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 504.14
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Kathryn Mize <hr/> Mailing Address 414 N Livingston Street #2 <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30602 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1824.95
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2645.05
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Kathryn Mize	Transaction ID: SB30B.30670 Date of Disbursement 01 / 31 / 2008
	Mailing Address 414 N Livingston Street #2	Amount of Each Disbursement this Period 1739.06
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sherrie Osegard	Transaction ID: SB30B.30603 Date of Disbursement 01 / 15 / 2008
	Mailing Address 2346 Talc Trail #208	Amount of Each Disbursement this Period 977.99
	City Madison State WI Zip Code 53719	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sherrie Osegard	Transaction ID: SB30B.30671 Date of Disbursement 01 / 31 / 2008
	Mailing Address 2346 Talc Trail #208	Amount of Each Disbursement this Period 972.29
	City Madison State WI Zip Code 53719	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3689.34
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Scott Poole

Transaction ID: SB30B.30612
Date of Disbursement

Mailing Address 445 West Gilman #202

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	0	8

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Scott Poole

Transaction ID: SB30B.30679
Date of Disbursement

Mailing Address 445 West Gilman #202

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	0	8

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Karoline Rezin

Transaction ID: SB30B.30604
Date of Disbursement

Mailing Address 5329 Old Middleton Rd, Apt. 202

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	0	8

City Madison State WI Zip Code 53705

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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)

PAGE 56 / 72

<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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Karoline Rezin	Transaction ID: SB30B.30672 Date of Disbursement 01 / 31 / 2008
	Mailing Address 5329 Old Middleton Rd, Apt. 202	Amount of Each Disbursement this Period 1300.39
	City Madison State WI Zip Code 53705	
	Purpose of Disbursement Payroll	Category/ Type
	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) Nicole Ruzinski	Transaction ID: SB30B.30673 Date of Disbursement 01 / 31 / 2008
	Mailing Address 7230 N 107th St	Amount of Each Disbursement this Period 349.43
	City Milwaukee State WI Zip Code 53224	
	Purpose of Disbursement Payroll	Category/ Type
	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) James Sanders	Transaction ID: SB30B.30613 Date of Disbursement 01 / 15 / 2008
	Mailing Address 4510 Texas Trail	Amount of Each Disbursement this Period 497.24
	City Madison State WI Zip Code 53704	
	Purpose of Disbursement Payroll	Category/ Type
	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)	▶	2147.06
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
James Sanders

Transaction ID: SB30B.30680
Date of Disbursement

Mailing Address 4510 Texas Trail

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	0	8

City Madison State WI Zip Code 53704

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

--

614.90

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Charles Triller

Transaction ID: SB30B.30614
Date of Disbursement

Mailing Address 609 East Gorham St #14

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	0	8

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

--

462.32

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Charles Triller

Transaction ID: SB30B.30683
Date of Disbursement

Mailing Address 609 East Gorham St #14

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	0	8

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

--

648.64

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1725.86

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

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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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Joshua Wilson <hr/> Mailing Address 641 West Main Street <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30615 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 426.52
B.	Full Name (Last, First, Middle Initial) Joshua Wilson <hr/> Mailing Address 641 West Main Street <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30684 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 641.72
C.	Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue <hr/> Mailing Address PO Box 93208 <hr/> City Milwaukee State WI Zip Code 53293 <hr/> Purpose of Disbursement Payroll tax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30617 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1052.89

SUBTOTAL of Disbursements This Page (optional) ▶	2121.13
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)

PAGE 59 / 72

<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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue <hr/> Mailing Address PO Box 93208 <hr/> City Milwaukee State WI Zip Code 53293 <hr/> Purpose of Disbursement Payroll tax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30619 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 132.19
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue <hr/> Mailing Address PO Box 93208 <hr/> City Milwaukee State WI Zip Code 53293 <hr/> Purpose of Disbursement Payroll tax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.30662 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 1233.79
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

1365.98

TOTAL This Period (last page this line number only) ►

51263.20

SCHEDULE C (FEC Form 3X)

LOANS

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.6376

LOAN SOURCE Full Name (Last, First, Middle Initial)

M&I Bank of Southern Wisconsin

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address P.O. Box 5920

City Madison State WI ZIP Code 53705

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
110000.00	107156.30	2843.70

TERMS

Date Incurred: MM DD YY 01 09 2002 Date Due: 04/30/08 Interest Rate: 8.25 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	2843.70
TOTALS This Period (last page in this line only)00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.10726

LOAN SOURCE Full Name (Last, First, Middle Initial)

M&I Bank of Southern Wisconsin

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address P.O. Box 5920

City Madison State WI ZIP Code 53705

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
34000.00	10300.00	23700.00

TERMS

Date Incurred: MM DD YYYY 12 31 2003 Date Due: 4/30/08 Interest Rate: 8.25 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	23700.00
TOTALS This Period (last page in this line only)	26543.70

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 Republican Party of Wisconsin

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- Presidential-Only Election Year (28% Federal)
- Presidential and Senate Election Year (36% Federal)
- Senate-Only Election Year (21% Federal)
- Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Charter Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 135 South LaSalle Street Dept 8123			Allocated Activity or Event Year-To-Date [65.34]		
City	State	Zip Code	Category/Type		
Chicago	IL	60674	[]		
Purpose of Disbursement: Cable TV			Date		
Activity or Event Identifier: Administrative			[M M / D D / Y Y Y Y] [0 1 / 0 2 / 2 0 0 8]		
			Transaction ID: H4.30569		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[18.30]		[47.04]		[65.34]

B. Full Name (Last, First, Middle Initial) Office Max			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2420 East Springs Dr			Allocated Activity or Event Year-To-Date [124.41]		
City	State	Zip Code	Category/Type		
Madison	WI	53701	[]		
Purpose of Disbursement: Office supplies			Date		
Activity or Event Identifier: Administrative			[M M / D D / Y Y Y Y] [0 1 / 0 2 / 2 0 0 8]		
			Transaction ID: H4.30572		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[16.54]		[42.53]		[59.07]

C. Full Name (Last, First, Middle Initial) Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Po Box 856042			Allocated Activity or Event Year-To-Date [3210.98]		
City	State	Zip Code	Category/Type		
Louisville	KY	40285	[]		
Purpose of Disbursement: Postage meter postage			Date		
Activity or Event Identifier: Administrative			[M M / D D / Y Y Y Y] [0 1 / 0 2 / 2 0 0 8]		
			Transaction ID: H4.30573		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[864.24]		[2222.33]		[3086.57]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[899.08]		[2311.90]		[3210.98]

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Pro One Janitorial Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1486 Kenwood Center			Allocated Activity or Event Year-To-Date 3710.98		
City Menasha	State WI	Zip Code 54952	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 1 / 0 2 / 2 0 0 8		
Purpose of Disbursement: Custodial expense			Transaction ID: H4.30574		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.00		360.00		500.00

B. Full Name (Last, First, Middle Initial) Shadow Fax			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4601 Helfesen Dr			Allocated Activity or Event Year-To-Date 4086.04		
City Madison	State WI	Zip Code 53718	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 1 / 0 2 / 2 0 0 8		
Purpose of Disbursement: Printer ink			Transaction ID: H4.30575		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.02		270.04		375.06

C. Full Name (Last, First, Middle Initial) TDS Metrocom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1010			Allocated Activity or Event Year-To-Date 4915.12		
City Monroe	State WI	Zip Code 53566	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 1 / 0 2 / 2 0 0 8		
Purpose of Disbursement: Phone bill			Transaction ID: H4.30576		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
232.14		596.94		829.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
477.16		1226.98		1704.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Badgerland Chemical & Supply			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 620303			Allocated Activity or Event Year-To-Date 5036.02		
City Middleton	State WI	Zip Code 53562	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Janitorial supplies			Transaction ID: H4.30584		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.85		87.05		120.90

B. Full Name (Last, First, Middle Initial) Best Buds LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 348 Woodland Circle			Allocated Activity or Event Year-To-Date 6056.02		
City madison	State WI	Zip Code 53704	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Snow removal			Transaction ID: H4.30585		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.60		734.40		1020.00

C. Full Name (Last, First, Middle Initial) Gordon Flesch Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 992			Allocated Activity or Event Year-To-Date 6307.74		
City Madison	State WI	Zip Code 53701	Date <input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Copier toner			Transaction ID: H4.30587		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.48		181.24		251.72

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
389.93		1002.69		1392.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
MG&E

Mailing Address
PO Box 1231

City State Zip Code
Madison WI 53701

Purpose of Disbursement:
Energy bill

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6984.20

Date 01 / 14 / 2008

Transaction ID: H4.30588

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
189.41		487.05		676.46

B. Full Name (Last, First, Middle Initial)
Shadow Fax

Mailing Address
4601 Helfesen Dr

City State Zip Code
Madison WI 53718

Purpose of Disbursement:
Printer ink

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7109.22

Date 01 / 14 / 2008

Transaction ID: H4.30589

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.01		90.01		125.02

C. Full Name (Last, First, Middle Initial)
West Bend Mutual Insurance

Mailing Address
1900 South 18th Ave

City State Zip Code
West Bend WI 53095

Purpose of Disbursement:
Building insurance

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

- Administrative Fundraising Exempt
- Voter Drive Direct Candidate Support
- Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8638.97

Date 01 / 14 / 2008

Transaction ID: H4.30591

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
428.33		1101.42		1529.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
652.75		1678.48		2331.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) City of Madison Treasurer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 215 Martin Luther King Blvd			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">9013.94</div>	
City	State	Zip Code	Category/ Type	
Madison	WI	53701		
Purpose of Disbursement: Water bill			Date M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 8 Transaction ID: H4.30592	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.99		269.98		374.97

B. Full Name (Last, First, Middle Initial) City of Madison Treasurer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 215 Martin Luther King Blvd			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">9151.46</div>	
City	State	Zip Code	Category/ Type	
Madison	WI	53701		
Purpose of Disbursement: Personal property tax			Date M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 8 Transaction ID: H4.30593	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.51		99.01		137.52

C. Full Name (Last, First, Middle Initial) City of Madison Treasurer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 215 Martin Luther King Blvd			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">14927.45</div>	
City	State	Zip Code	Category/ Type	
Madison	WI	53701		
Purpose of Disbursement: Property tax			Date M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 8 Transaction ID: H4.30594	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1617.28		4158.71		5775.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1760.78		4527.70		6288.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) GFC Leasing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1129			Allocated Activity or Event Year-To-Date 15477.25		
City Madison	State WI	Zip Code 53701	Date MM / DD / YYYY 01 / 25 / 2008		
Purpose of Disbursement: Copier lease			Transaction ID: H4.30647		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.94		395.86		549.80

B. Full Name (Last, First, Middle Initial) Charter Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 135 South LaSalle Street Dept 8123			Allocated Activity or Event Year-To-Date 15542.58		
City Chicago	State IL	Zip Code 60674	Date MM / DD / YYYY 01 / 31 / 2008		
Purpose of Disbursement: Cable TV			Transaction ID: H4.30687		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.29		47.04		65.33

C. Full Name (Last, First, Middle Initial) FedEx			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1140			Allocated Activity or Event Year-To-Date 15566.73		
City Memphis	State TN	Zip Code 38101	Date MM / DD / YYYY 01 / 31 / 2008		
Purpose of Disbursement: Package delivery			Transaction ID: H4.30688		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.76		17.39		24.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
178.99		460.29		639.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Great Glacier of Wisconsin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 249			Allocated Activity or Event Year-To-Date 15616.64	
City Lake Delton	State WI	Zip Code 53940	Date M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8	
Purpose of Disbursement: Bottled water			Transaction ID: H4.30689	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.97		35.94		49.91

B. Full Name (Last, First, Middle Initial) MG&E			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1231			Allocated Activity or Event Year-To-Date 16464.46	
City Madison	State WI	Zip Code 53701	Date M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8	
Purpose of Disbursement: Energy Bill			Transaction ID: H4.30692	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.39		610.43		847.82

C. Full Name (Last, First, Middle Initial) Office Max			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2420 East Springs Dr			Allocated Activity or Event Year-To-Date 17123.72	
City Madison	State WI	Zip Code 53701	Date M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8	
Purpose of Disbursement: Office supplies			Transaction ID: H4.30693	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
184.59		474.67		659.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
435.95		1121.04		1556.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 85460			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">18756.86</div>	
City	State	Zip Code	Category/ Type	
Louisville	KY	40285		
Purpose of Disbursement: Postage machine lease			Date M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8 Transaction ID: H4.30695	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
457.28		1175.86		1633.14

B. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 85460			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">18810.64</div>	
City	State	Zip Code	Category/ Type	
Louisville	KY	40285		
Purpose of Disbursement: Postage machine supplies			Date M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8 Transaction ID: H4.30696	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.06		38.72		53.78

C. Full Name (Last, First, Middle Initial) Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Po Box 856042			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">20414.66</div>	
City	State	Zip Code	Category/ Type	
Louisville	KY	40285		
Purpose of Disbursement: Postage machine postage			Date M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 8 Transaction ID: H4.30697	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
449.13		1154.89		1604.02

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
921.47		2369.47		3290.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Pro One Janitorial Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 1486 Kenwood Center			Allocated Activity or Event Year-To-Date 20914.66																	
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>1</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>		M	M	0	1	D	D	3	1	Y	Y	Y	Y	2	0	0	8
M	M																			
0	1																			
D	D																			
3	1																			
Y	Y	Y	Y																	
2	0	0	8																	
Menasha	WI	54952																		
Purpose of Disbursement: Custodial expense			Category/ Type																	
Activity or Event Identifier: Administrative			Transaction ID: H4.30698																	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.00		360.00		500.00

B. Full Name (Last, First, Middle Initial) Service Specialists Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address PO Box 160			Allocated Activity or Event Year-To-Date 21285.64																	
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>1</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>		M	M	0	1	D	D	3	1	Y	Y	Y	Y	2	0	0	8
M	M																			
0	1																			
D	D																			
3	1																			
Y	Y	Y	Y																	
2	0	0	8																	
Sun Prairie	WI	53590																		
Purpose of Disbursement: A/C maintenance			Category/ Type																	
Activity or Event Identifier: Administrative			Transaction ID: H4.30699																	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.87		267.11		370.98

C. Full Name (Last, First, Middle Initial) Waste Management			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address PO Box 9001505			Allocated Activity or Event Year-To-Date 21413.44																	
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>1</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>		M	M	0	1	D	D	3	1	Y	Y	Y	Y	2	0	0	8
M	M																			
0	1																			
D	D																			
3	1																			
Y	Y	Y	Y																	
2	0	0	8																	
Louisville	KY	40290																		
Purpose of Disbursement: Waste removal			Category/ Type																	
Activity or Event Identifier: Administrative			Transaction ID: H4.30701																	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.78		92.02		127.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
279.65		719.13		998.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
5995.76		15417.68		21413.44

Image# 28931085235

Form/Schedule: **SC/10** On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments.
Transaction ID: **SC/10.6376** FEC Tech Support has advised this procedure to show a draw on the line of credit
