

# 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 2007 through 01 31 2007

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 08 10 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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	7

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		4485.41
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	4485.41									
(c) Total Receipts (from Line 19) .....	162562.42	162562.42								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	167047.83	167047.83								
7. Total Disbursements (from Line 31) .....	127995.69	127995.69								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	39052.14	39052.14								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	34700.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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	7

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	40500.00	40500.00
(i) Itemized (use Schedule A) .....	114551.59	114551.59
(ii) Unitemized .....	155051.59	155051.59
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	7500.00	7500.00
(c) Other Political Committees (such as PACs) .....	162551.59	162551.59
(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) .....	10.83	10.83
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)) .....	162562.42	162562.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	162562.42	162562.42

**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.....	3638.84	3638.84
(ii) Non-Federal Share.....	13688.92	13688.92
(b) Other Federal Operating Expenditures.....	48549.48	48549.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	65877.24	65877.24
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 .....	62118.45	62118.45
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	62118.45	62118.45
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	127995.69	127995.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	114306.77	114306.77

**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 .....	162551.59	162551.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	162551.59	162551.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	52188.32	52188.32
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	10.83	10.83
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	52177.49	52177.49

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 65
	<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	

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

<b>A.</b> Full Name (Last, First, Middle Initial) John Bolz		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7
Mailing Address 424 Farwell Dr		<b>Transaction ID:</b> SA11A1.27684
City State Zip Code Madison WI 53704	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert Bolz		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 7
Mailing Address 411 Summit Rd		<b>Transaction ID:</b> SA11A1.27685
City State Zip Code Madison WI 53704	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		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 ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kathryn Burke		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7
Mailing Address 7710 N Merrie Lane		<b>Transaction ID:</b> SA11A1.27687
City State Zip Code Fox Point WI 53217	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Contribution
Name of Employer Housewife	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 65
	<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 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  
MM / DD / YYYY  
01 / 19 / 2007

Transaction ID: SA11A1.27688

Amount of Each Receipt this Period  
1000.00

Contribution

**B.** 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  
MM / DD / YYYY  
01 / 22 / 2007

Transaction ID: SA11A1.27689

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address 2113 Monroe St

City State Zip Code  
New Holstein WI 53061

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

Name of Employer Occupation  
C.J. Meiselwitz Furniture Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
01 / 25 / 2007

Transaction ID: SA11A1.27691

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 65
	<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 Farrell

Mailing Address 323 S Beaumont Rd

City State Zip Code  
Prairie Du Chien WI 53821

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

Name of Employer Occupation  
Peoples State Bank Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.27597

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address 2618 22nd Ave

City State Zip Code  
Monroe WI 53566

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

Name of Employer Occupation  
Monroe Truck Equipment CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.27692

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address PO Box 538

City State Zip Code  
Beaver Dam WI 53916

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

Name of Employer Occupation  
Apache Stainless Equipp CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.27693

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 65
	<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)  
James French

Mailing Address 1515 Ridge Rd

City State Zip Code  
Sheboygan WI 53081

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

Name of Employer J.L. French Corp. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2007

Transaction ID: SA11A1.27694

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address 1522 N Prospect Ave, Unit 1801

City State Zip Code  
Milwaukee WI 53202

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 ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2007

Transaction ID: SA11A1.27695

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address 5339 N. Hwy 83

City State Zip Code  
Hartland WI 53029

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 / 03 / 2007

Transaction ID: SA11A1.27610

Amount of Each Receipt this Period  
500.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 65
	<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)  
Carole Houston

Mailing Address 625 Park Circle

City Elm Grove State WI Zip Code 53122

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.27701

Amount of Each Receipt this Period  
 250.00

Contribution

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

Mailing Address 1020 Madera Circle

City Elm Grove State WI Zip Code 53122

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 ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.27702

Amount of Each Receipt this Period  
 1000.00

Contribution

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

Mailing Address P.O. Box 650

City Janesville State WI Zip Code 53547

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

Name of Employer Gere Corporation Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.27703

Amount of Each Receipt this Period  
 250.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 65
	<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)  
Imogene Johnson

Mailing Address 4815 Lighthouse Drive

City State Zip Code  
Racine WI 53402

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 09 / 2007

Transaction ID: SA11A1.27612

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address 10559 Michigan Ave

City State Zip Code  
Hayward WI 54843-7122

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

Name of Employer Occupation  
Johnson Timber Corp Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 22 / 2007

Transaction ID: SA11A1.27704

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address 1909 N River Park Rd

City State Zip Code  
Milwaukee WI 53226

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

Name of Employer Occupation  
Central States Mortgage Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 04 / 2007

Transaction ID: SA11A1.27613

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 65
	<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)  
Mary Kohler

Mailing Address PO Box 897

City State Zip Code  
Sheboygan WI 53082

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

Name of Employer Occupation  
Windway Capitol Corp Public Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
01 / 09 / 2007

Transaction ID: SA11A1.27615

Amount of Each Receipt this Period  
2500.00

Contribution

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

Mailing Address 630 Riverfront Drive

City State Zip Code  
Sheboygan WI 53082

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

Name of Employer Occupation  
Windway Capital Corp President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
01 / 09 / 2007

Transaction ID: SA11A1.27616

Amount of Each Receipt this Period  
2500.00

Contribution

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

Mailing Address 2701 Sunset Blvd #1

City State Zip Code  
Stevens Point WI 54481

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2007

Transaction ID: SA11A1.27707

Amount of Each Receipt this Period  
125.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5125.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 65
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Helen Loewi		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address 9621 North Lake Drive		Transaction ID: SA11A1.27709
City State Zip Code Milwaukee WI 53217	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Milwaukee Resistor	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Henry Loos		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 7
Mailing Address 2159 W Hidden Reserve Ct		Transaction ID: SA11A1.27619
City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Quarles & Brady	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Gene Mallinger		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address 870 Auburn Court		Transaction ID: SA11A1.27710
City State Zip Code Brookfield WI 53045	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Metal-Era Inc	Occupation Information requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 65
	<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

Full Name (Last, First, Middle Initial) <b>A. Michael Martin</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address W8485 Trillium Ln		Transaction ID: SA11A1.27711	
City State Zip Code Antigo WI 54409	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Allied Insurance Center Insurance Sales	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>B. D McKeithan</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7	
Mailing Address 777 E Wisconsin Ave #1920		Transaction ID: SA11A1.27712	
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Tamarack Petroleum Co Executive	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Mike Menard</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7	
Mailing Address 40 Oak Creek Trail		Transaction ID: SA11A1.27713	
City State Zip Code Madison WI 53717	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Occupation Self Employed Real Estate	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 65
	<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 Merkel

Mailing Address M210 Red Hawk Ln

City State Zip Code  
Marshfield WI 54449

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 ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
01 / 05 / 2007

Transaction ID: SA11A1.27626

Amount of Each Receipt this Period  
200.00

Contribution

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

Mailing Address 240 W. Manor Circle

City State Zip Code  
Milwaukee WI 53217

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

Name of Employer Information requested Occupation Information requested  
MTS, Inc Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 23 / 2007

Transaction ID: SA11A1.27714

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 3704 N Lake Dr

City State Zip Code  
Milwaukee WI 53211

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

Name of Employer Information requested Occupation Information requested  
Badger Bluegrass Co, Inc Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 04 / 2007

Transaction ID: SA11A1.27628

Amount of Each Receipt this Period  
500.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 65
	<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)  
David Morris

Mailing Address 832 Country Club Lane

City Onalaska State WI Zip Code 54650

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

Name of Employer Self Employed 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  
 0 1 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.27629

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 Lake Geneva State WI Zip Code 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  
 0 1 / 1 7 / 2 0 0 7

Transaction ID: SA11A1.27715

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 Hartland State WI Zip Code 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  
 0 1 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.27716

Amount of Each Receipt this Period  
 5000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 65
	<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 OToole

Mailing Address 2401 W Cedar Lane

City State Zip Code  
River Hills WI 53217

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

Name of Employer Occupation  
A.O. Smith Corp President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
01 / 29 / 2007

Transaction ID: SA11A1.27717

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address 1380 W Wisconsin Ave Apt 117

City State Zip Code  
Oconomowoc WI 53066

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 ▼  
250.00

Date of Receipt  
01 / 04 / 2007

Transaction ID: SA11A1.27636

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 1711 Circle Drive

City State Zip Code  
New Holstein WI 53061

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
01 / 17 / 2007

Transaction ID: SA11A1.27718

Amount of Each Receipt this Period  
500.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 65
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) <b>A. Maurice Reese</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7	
Mailing Address 713 Lakewood Boulevard		<b>Transaction ID: SA11A1.27719</b>	
City State Zip Code Madison WI 53704	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Retired Occupation	Aggregate Year-to-Date ▼ 1250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Charles Roy</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 7	
Mailing Address 14245 Heatherwood Ct		<b>Transaction ID: SA11A1.27642</b>	
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 Rexnord Corp Occupation VP Finance	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. John Sensenbrenner</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7	
Mailing Address 909 East Forest Avenue		<b>Transaction ID: SA11A1.27727</b>	
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 Retired Occupation	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 65
	<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)  
Lloyd Smith

Mailing Address 1629 W Pinewood Ct

City State Zip Code  
Mequon WI 53092

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 ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.27654

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address 1629 W Pinewood Ct

City State Zip Code  
Mequon WI 53092

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 ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.27655

Amount of Each Receipt this Period  
1000.00

Contribution

**C.** 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 TA Solberg Company, Inc Occupation Grocer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.27729

Amount of Each Receipt this Period  
1250.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 65
	<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

Full Name (Last, First, Middle Initial) <b>A.</b> Raymond St. Ange Mailing Address 1520 22nd Street City State Zip Code Kenosha WI 53140 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 7 Transaction ID: SA11A1.27732 Amount of Each Receipt this Period 100.00 Contribution
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Scott Swett Mailing Address PO Box 425 City State Zip Code Osseo WI 54758 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 7 Transaction ID: SA11A1.27733 Amount of Each Receipt this Period 250.00 Contribution
Name of Employer Self Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Don Taylor Mailing Address S23 W27100 Shanangi Lane City State Zip Code Waukesha WI 53188 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7 Transaction ID: SA11A1.27662 Amount of Each Receipt this Period 250.00 Contribution
Name of Employer Waukesha State Bank Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Banker Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 65
	<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)  
Don Taylor

Mailing Address S23 W27100 Shanangi Lane

City State Zip Code  
Waukesha WI 53188

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

Name of Employer Occupation  
Waukesha State Bank Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.27663

Amount of Each Receipt this Period  
75.00

Contribution

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

Mailing Address 4521 Winnequah Road

City State Zip Code  
Monona WI 53716

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

Name of Employer Occupation  
University of St. Thomas Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.27735

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 4676 North Wilshire Road

City State Zip Code  
Milwaukee WI 53211

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

Name of Employer Occupation  
Essential Industries Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 1 7 / 2 0 0 7

Transaction ID: SA11A1.27736

Amount of Each Receipt this Period  
1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1325.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 65
	(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)  
Michael White

Mailing Address 1150 W. Bradley Road

City State Zip Code  
Milwaukee WI 53217

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

Name of Employer Occupation  
Rite Hite Corporation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 17 / 2007

Transaction ID: SA11A1.27737

Amount of Each Receipt this Period  
1000.00

Contribution

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

Mailing Address 5409 German Village Rd

City State Zip Code  
West Bend WI 53095

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

Name of Employer Occupation  
B. C. Ziegler & Company Chairman/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 09 / 2007

Transaction ID: SA11A1.27673

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	40500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 65
	<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

Mailing Address 1840 North Farwell Avenue

City State Zip Code  
Milwaukee WI 53202

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 0 4 / 2 0 0 7

**Transaction ID:** SA11C.27677

Amount of Each Receipt this Period  
2500.00

Contribution

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

Mailing Address P. O. Box 1919  
P. O. Box 1919

City State Zip Code  
Janesville WI 53547

FEC ID number of contributing federal political committee. **C** C00330894

Name of Employer Occupation

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 / 2 2 / 2 0 0 7

**Transaction ID:** SA11C.27723

Amount of Each Receipt this Period  
5000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	7500.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial) <b>A. City of Madison Treasurer</b>		<b>Transaction ID:</b> SB21B.27541 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address 215 Martin Luther King Blvd		Amount of Each Disbursement this Period 5516.56
City Madison State WI Zip Code 53701	Purpose of Disbursement Property tax 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. City of Madison Treasurer</b>		<b>Transaction ID:</b> SB21B.27542 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address 215 Martin Luther King Blvd		Amount of Each Disbursement this Period 427.34
City Madison State WI Zip Code 53701	Purpose of Disbursement Water/sewer bill 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Culver's</b>		<b>Transaction ID:</b> SB21B.27739 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address W6606 Hwy. 23		Amount of Each Disbursement this Period 8.95
City Fond du Lac State WI Zip Code 54937-9773	Purpose of Disbursement Staff lunch 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>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5943.90
<b>TOTAL</b> 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)

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<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

<b>A. Culver's</b> Full Name (Last, First, Middle Initial) Mailing Address W6606 Hwy. 23 City Fond du Lac State WI Zip Code 54937-9773 Purpose of Disbursement Staff meal 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>Transaction ID: SB21B.27743</b> Date of Disbursement 12 / 01 / 2006 Amount of Each Disbursement this Period 12.00 <b>[MEMO ITEM]</b>
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<b>B. Department of Administration</b> Full Name (Last, First, Middle Initial) Mailing Address PO BOX 7864 City Madison State WI Zip Code 53707 Purpose of Disbursement Document photocopies 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>Transaction ID: SB21B.27539</b> Date of Disbursement 01 / 29 / 2007 Amount of Each Disbursement this Period 212.25
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<b>C. Donnelley Marketing</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 3603 City Omaha State NE Zip Code 68103-0603 Purpose of Disbursement 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>Transaction ID: SB21B.27496</b> Date of Disbursement 01 / 12 / 2007 Amount of Each Disbursement this Period 416.20
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>628.45</b>
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. Ellen's Prestige Catering</b>		<b>Transaction ID:</b> SB21B.27497 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 613 North Grandview Blvd.		Amount of Each Disbursement this Period 332.71
City Waukesha State WI Zip Code 53188-2877	Category/ Type	
Purpose of Disbursement Sales tax on catering bill		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Globalwide Gifts</b>		<b>Transaction ID:</b> SB21B.27748 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 6
Mailing Address PO Box 346		Amount of Each Disbursement this Period 252.63
City Jordan State NY Zip Code 13080	Category/ Type	
Purpose of Disbursement Crystal elephants		
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>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. Globalwide Gifts</b>		<b>Transaction ID:</b> SB21B.27749 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 6
Mailing Address PO Box 346		Amount of Each Disbursement this Period 252.63
City Jordan State NY Zip Code 13080	Category/ Type	
Purpose of Disbursement Crystal elephants		
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>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	332.71
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Ian Travel Services</b>		<b>Transaction ID:</b> SB21B.27744 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 10440 North Central Expressway		Amount of Each Disbursement this Period 268.83  <b>[MEMO ITEM]</b>
City Dallas State TX Zip Code 75231		
Purpose of Disbursement Staff travel 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Juke Box Bandstand</b>		<b>Transaction ID:</b> SB21B.27458 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address P.O. Box 131		Amount of Each Disbursement this Period 500.00
City DeForest State WI Zip Code 53532		
Purpose of Disbursement music for inauguration party 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Junior's Promotions &amp; Apparel</b>		<b>Transaction ID:</b> SB21B.27522 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address 5313 Kvamme Lane		Amount of Each Disbursement this Period 1539.55
City Madison State WI Zip Code 53716		
Purpose of Disbursement Coasters for inauguration event 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2039.55
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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

Full Name (Last, First, Middle Initial) <b>A. M&amp;I Bank Credit Card Processing Center</b>		<b>Transaction ID:</b> SB21B.27500 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address PO Box 3052		Amount of Each Disbursement this Period 2818.56
City Milwaukee State WI Zip Code 53201	Purpose of Disbursement Credit card charges	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. M&amp;I Bank of Southern Wisconsin</b>		<b>Transaction ID:</b> SB21B.27501 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 588.19
City Madison State WI Zip Code 53705	Purpose of Disbursement Line of credit interest	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. M&amp;I Bank of Southern Wisconsin</b>		<b>Transaction ID:</b> SB21B.27535 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address P.O. Box 5920		Amount of Each Disbursement this Period 541.65
City Madison State WI Zip Code 53705	Purpose of Disbursement Line of credit interest	
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3948.40
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Madison Concourse Hotel</b>		<b>Transaction ID: SB21B.27529</b>	
Mailing Address 1 West Dayton Street		Date of Disbursement 01 / 24 / 2007	
City Madison	State WI	Zip Code 53703	Amount of Each Disbursement this Period 3625.50
Purpose of Disbursement Room rental - not FEA		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:			

Full Name (Last, First, Middle Initial) <b>B. Daniel Morse</b>		<b>Transaction ID: SB21B.27520</b>	
Mailing Address PO Box 2644		Date of Disbursement 01 / 24 / 2007	
City Madison	State WI	Zip Code 53701	Amount of Each Disbursement this Period 289.86
Purpose of Disbursement Balloons for inauguration party		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:			

Full Name (Last, First, Middle Initial) <b>C. Paypal, Inc.</b>		<b>Transaction ID: SB21B.27740</b>	
Mailing Address #774100, 4100 Solutions Center		Date of Disbursement 11 / 18 / 2006	
City Chicago	State IL	Zip Code 60677-4001	Amount of Each Disbursement this Period 19.95
Purpose of Disbursement Credit card processing fee		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]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3915.36</b>
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. PostMaster</b>		<b>Transaction ID: SB21B.27513</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 7	
Mailing Address PO Box 7005		Amount of Each Disbursement this Period 1000.00	
City Madison State WI Zip Code 53707	Purpose of Disbursement Business reply mail postage	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. PostMaster</b>		<b>Transaction ID: SB21B.27538</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7	
Mailing Address PO Box 7005		Amount of Each Disbursement this Period 1000.00	
City Madison State WI Zip Code 53707	Purpose of Disbursement Business reply mail postage	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Radisson Hotel Milwaukee</b>		<b>Transaction ID: SB21B.27745</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 6	
Mailing Address 7065 N Port Washington Rd		Amount of Each Disbursement this Period 148.63	
City Milwaukee State WI Zip Code 53217	Purpose of Disbursement Staff room rental - not FEA	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Radisson Hotel Milwaukee</b>		Transaction ID: SB21B.27746 Date of Disbursement 12 / 05 / 2006	
Mailing Address 7065 N Port Washington Rd		Amount of Each Disbursement this Period 414.96	
City Milwaukee State WI Zip Code 53217	Purpose of Disbursement Staff room rental - 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Radisson Hotel Milwaukee</b>		Transaction ID: SB21B.27747 Date of Disbursement 12 / 05 / 2006	
Mailing Address 7065 N Port Washington Rd		Amount of Each Disbursement this Period 1396.18	
City Milwaukee State WI Zip Code 53217	Purpose of Disbursement Staff room rental - 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) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Riverside Family Restaurant</b>		Transaction ID: SB21B.27741 Date of Disbursement 11 / 20 / 2007	
Mailing Address 208 S Main St		Amount of Each Disbursement this Period 16.02	
City Janesville State WI Zip Code 53545	Purpose of Disbursement Staff meals		
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Subway Richland Center</b>		<b>Transaction ID:</b> SB21B.27738 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 6
Mailing Address 1117 Sextonville Rd		Amount of Each Disbursement this Period 8.51
City Richland Center State WI Zip Code 53581	Category/ Type	
Purpose of Disbursement Staff lunch		<b>[MEMO ITEM]</b>
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. The Old Fashioned</b>		<b>Transaction ID:</b> SB21B.27742 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 6
Mailing Address 23 N. Pinckney St.		Amount of Each Disbursement this Period 19.27
City Madison State WI Zip Code 53703	Category/ Type	
Purpose of Disbursement Staff meals		<b>[MEMO ITEM]</b>
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Unisource Direct</b>		<b>Transaction ID:</b> SB21B.27531 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address 925 Harrington Drive		Amount of Each Disbursement this Period 7605.16
City Madison State WI Zip Code 53718	Category/ Type	
Purpose of Disbursement Finance mailing - not FEA		<b>[MEMO ITEM]</b>
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7605.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Unisource Direct</b>		<b>Transaction ID: SB21B.27536</b>																					
Mailing Address 925 Harrington Drive		Date of Disbursement																					
City Madison State WI Zip Code 53718		<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>2</td><td>5</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	0	1		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		2	5		2	0	0	7														
Purpose of Disbursement Finance mailing - not FEA		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">11166.85</td> </tr> </table>		11166.85																			
11166.85																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) <b>B. Unisource Direct</b>		<b>Transaction ID: SB21B.27579</b>																					
Mailing Address 925 Harrington Drive		Date of Disbursement																					
City Madison State WI Zip Code 53718		<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>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	1		2	0	0	7														
Purpose of Disbursement Finance mailing - not FEA		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table>		10000.00																			
10000.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

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

<b>21166.85</b>
-----------------

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

<b>47580.38</b>
-----------------

# 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

Full Name (Last, First, Middle Initial) <b>A. American Funds Service Company</b>		<b>Transaction ID:</b> SB30B.27486																					
Mailing Address PO Box 6164		Date of Disbursement																					
City Indianapolis State IN Zip Code 46206		<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>2</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	0	1		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		1	2		2	0	0	7														
Purpose of Disbursement Employee Simple IRA		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">1045.83</td> </tr> </table>		1045.83																			
1045.83																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) <b>B. American Funds Service Company</b>		<b>Transaction ID:</b> SB30B.27544																					
Mailing Address PO Box 6164		Date of Disbursement																					
City Indianapolis State IN Zip Code 46206		<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>0</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	0	1		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	0		2	0	0	7														
Purpose of Disbursement Employee Simple IRA		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">102.40</td> </tr> </table>		102.40																			
102.40																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) <b>C. American Funds Service Company</b>		<b>Transaction ID:</b> SB30B.27545																					
Mailing Address PO Box 6164		Date of Disbursement																					
City Indianapolis State IN Zip Code 46206		<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>0</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	0	1		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	0		2	0	0	7														
Purpose of Disbursement Employee Simple IRA		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">1288.09</td> </tr> </table>		1288.09																			
1288.09																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2436.32</b>
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Dudley Bowlby</b>		<b>Transaction ID: SB30B.27473</b> Date of Disbursement 01 / 12 / 2007	
Mailing Address 250 Femrite Drive		Amount of Each Disbursement this Period 534.75	
City Madison State WI Zip Code 53716	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Dudley Bowlby</b>		<b>Transaction ID: SB30B.27558</b> Date of Disbursement 01 / 31 / 2007	
Mailing Address 250 Femrite Drive		Amount of Each Disbursement this Period 785.26	
City Madison State WI Zip Code 53716	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Celerity Staffing Solutions</b>		<b>Transaction ID: SB30B.27518</b> Date of Disbursement 01 / 24 / 2007	
Mailing Address PO Box 620306		Amount of Each Disbursement this Period 1138.05	
City Middleton State WI Zip Code 53562	Purpose of Disbursement Temporary staffing	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2458.06</b>
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Norman Dawson</b>		<b>Transaction ID: SB30B.27543</b> Date of Disbursement 01 / 30 / 2007
Mailing Address PO Box 698		Amount of Each Disbursement this Period 176.93
City Wyocena	State WI Zip Code 53969	
Purpose of Disbursement Payroll garnishment		
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:		

Full Name (Last, First, Middle Initial) <b>B. Dean Care</b>		<b>Transaction ID: SB30B.27546</b> Date of Disbursement 01 / 30 / 2007
Mailing Address PO Box 88610		Amount of Each Disbursement this Period 834.60
City Milwaukee	State WI Zip Code 53288	
Purpose of Disbursement Health insurance		
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:		

Full Name (Last, First, Middle Initial) <b>C. Department of Workforce Development</b>		<b>Transaction ID: SB30B.27511</b> Date of Disbursement 01 / 15 / 2007
Mailing Address PO Box 78960		Amount of Each Disbursement this Period 4765.04
City Milwaukee	State WI Zip Code 53278-0960	
Purpose of Disbursement Unemployment tax		
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5776.57</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 37 / 65

<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

Full Name (Last, First, Middle Initial) <b>A. Richard Dickie</b>		<b>Transaction ID: SB30B.27474</b> Date of Disbursement 01 / 12 / 2007	
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period 1080.05	
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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Richard Dickie</b>		<b>Transaction ID: SB30B.27559</b> Date of Disbursement 01 / 31 / 2007	
Mailing Address 126 North Blair Street #1		Amount of Each Disbursement this Period 1161.46	
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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jason Gammeter</b>		<b>Transaction ID: SB30B.27560</b> Date of Disbursement 01 / 31 / 2007	
Mailing Address 367 East Monroe St		Amount of Each Disbursement this Period 707.71	
City Wycocena State WI Zip Code 53969	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2949.22
<b>TOTAL</b> 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 / 65

<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

Full Name (Last, First, Middle Initial) <b>A. Guardian</b>		<b>Transaction ID:</b> SB30B.27547 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address PO Box 95101		Amount of Each Disbursement this Period 1345.78
City Chicago State IL Zip Code 60694	Purpose of Disbursement Dental insurance	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Donna Heimbach</b>		<b>Transaction ID:</b> SB30B.27476 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 3002 Dianne Drive		Amount of Each Disbursement this Period 512.55
City Middleton State WI Zip Code 53562	Purpose of Disbursement Payroll	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Donna Heimbach</b>		<b>Transaction ID:</b> SB30B.27561 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 3002 Dianne Drive		Amount of Each Disbursement this Period 1074.34
City Middleton State WI Zip Code 53562	Purpose of Disbursement Payroll	
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) ..... ▶

2932.67

**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)

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<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

Full Name (Last, First, Middle Initial) <b>A. IRS</b>		<b>Transaction ID:</b> SB30B.27483 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address      Payment Center		<b>Amount of Each Disbursement this Period</b> 4861.48	
City Kansas City	State MO		Zip Code 64999
Purpose of Disbursement Payroll tax			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:			

Full Name (Last, First, Middle Initial) <b>B. IRS</b>		<b>Transaction ID:</b> SB30B.27512 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 7	
Mailing Address      Payment Center		<b>Amount of Each Disbursement this Period</b> 709.78	
City Kansas City	State MO		Zip Code 64999
Purpose of Disbursement Payroll tax			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:			

Full Name (Last, First, Middle Initial) <b>C. IRS</b>		<b>Transaction ID:</b> SB30B.27568 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address      Payment Center		<b>Amount of Each Disbursement this Period</b> 6593.50	
City Kansas City	State MO		Zip Code 64999
Purpose of Disbursement Payroll tax			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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12164.76
<b>TOTAL</b> 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)

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<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

<b>A.</b> Full Name (Last, First, Middle Initial) Juston Johnson		<b>Transaction ID:</b> SB30B.27464 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 820 Williamson Street		Amount of Each Disbursement this Period 1002.83
City Madison State WI Zip Code 53703	Category/ Type	
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) ▼	

<b>B.</b> Full Name (Last, First, Middle Initial) Juston Johnson		<b>Transaction ID:</b> SB30B.27550 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 820 Williamson Street		Amount of Each Disbursement this Period 1305.15
City Madison State WI Zip Code 53703	Category/ Type	
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) ▼	

<b>C.</b> Full Name (Last, First, Middle Initial) Kimberly Jorns		<b>Transaction ID:</b> SB30B.27466 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period 1262.99
City De Pere State WI Zip Code 54115	Category/ Type	
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3570.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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

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

Full Name (Last, First, Middle Initial) <b>A. Kimberly Jorns</b>		<b>Transaction ID: SB30B.27557</b> Date of Disbursement MM / DD / YYYY 01 / 31 / 2007	
Mailing Address 233 N. Broadway #136		Amount of Each Disbursement this Period 2147.68	
City De Pere State WI Zip Code 54115	Purpose of Disbursement Payroll 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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Brian Kind</b>		<b>Transaction ID: SB30B.27467</b> Date of Disbursement MM / DD / YYYY 01 / 12 / 2007	
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period 1497.33	
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll 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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Brian Kind</b>		<b>Transaction ID: SB30B.27548</b> Date of Disbursement MM / DD / YYYY 01 / 31 / 2007	
Mailing Address 6403 Alison Ln		Amount of Each Disbursement this Period 1576.71	
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll 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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5221.72
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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<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

<b>A. Kirsten Kukowski</b> Full Name (Last, First, Middle Initial) Mailing Address 3029 Maple Valley Drive #201 City Madison State WI Zip Code 53719 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) ▼		<b>Transaction ID: SB30B.27549</b> Date of Disbursement 01 / 31 / 2007 Amount of Each Disbursement this Period 1227.05 Category/Type
--	--	---

<b>B. Jill Latham</b> Full Name (Last, First, Middle Initial) Mailing Address 5550 Caddis Bend #405 City Fitchburg State WI Zip Code 53711 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) ▼		<b>Transaction ID: SB30B.27460</b> Date of Disbursement 01 / 10 / 2007 Amount of Each Disbursement this Period 957.30 Category/Type
--	--	--

<b>C. Jill Latham</b> Full Name (Last, First, Middle Initial) Mailing Address 5550 Caddis Bend #405 City Fitchburg State WI Zip Code 53711 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) ▼		<b>Transaction ID: SB30B.27462</b> Date of Disbursement 01 / 10 / 2007 Amount of Each Disbursement this Period 147.80 Category/Type
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2332.15
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Larry Loomis</b>		<b>Transaction ID:</b> SB30B.27477 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period 326.58
City Madison State WI Zip Code 53719	Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Larry Loomis</b>		<b>Transaction ID:</b> SB30B.27562 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 3157 Muir Field Road #47		Amount of Each Disbursement this Period 480.37
City Madison State WI Zip Code 53719	Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ryan Mahoney</b>		<b>Transaction ID:</b> SB30B.27551 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 7608 Hamilton Spring Rd		Amount of Each Disbursement this Period 320.25
City Bethesda State MD Zip Code 20817	Category/ Type	
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1127.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**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 / 65

<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

Full Name (Last, First, Middle Initial) <b>A. Kathryn Mize</b>		Transaction ID: SB30B.27469 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address 414 N Livingston Street #2		Amount of Each Disbursement this Period 1220.61	
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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Kathryn Mize</b>		Transaction ID: SB30B.27552 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address 414 N Livingston Street #2		Amount of Each Disbursement this Period 1325.71	
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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Thomas Mooney</b>		Transaction ID: SB30B.27470 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7	
Mailing Address 163 Avon St. Apt 4		Amount of Each Disbursement this Period 1025.15	
City La Crosse State WI Zip Code 54603	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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3571.47
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Thomas Mooney</b>		<b>Transaction ID:</b> SB30B.27553 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 163 Avon St. Apt 4		Amount of Each Disbursement this Period 1023.61
City La Crosse State WI Zip Code 54603	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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Jeffery Noltner</b>		<b>Transaction ID:</b> SB30B.27563 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 1543 Langley Lane		Amount of Each Disbursement this Period 186.54
City Madison State WI Zip Code 53718	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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Sherrie Osegard</b>		<b>Transaction ID:</b> SB30B.27471 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period 978.81
City Madison State WI Zip Code 53719	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) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2188.96
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. Sherrie Osegard</b>		<b>Transaction ID:</b> SB30B.27554 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 2346 Talc Trail #208		Amount of Each Disbursement this Period 976.01
City Madison State WI Zip Code 53719	Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Scott Poole</b>		<b>Transaction ID:</b> SB30B.27479 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period 213.21
City Madison State WI Zip Code 53703	Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Scott Poole</b>		<b>Transaction ID:</b> SB30B.27564 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 445 West Gilman #202		Amount of Each Disbursement this Period 701.17
City Madison State WI Zip Code 53703	Category/ Type	
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1890.39
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. QualiTemps Inc.</b>		<b>Transaction ID:</b> SB30B.27504 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address PO Box 552		Amount of Each Disbursement this Period 560.00
City Madison State WI Zip Code 53701	Category/ Type	
Purpose of Disbursement Temporary employee services		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>B. QualiTemps Inc.</b>		<b>Transaction ID:</b> SB30B.27525 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address PO Box 552		Amount of Each Disbursement this Period 616.00
City Madison State WI Zip Code 53701	Category/ Type	
Purpose of Disbursement Temporary staffing		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>C. QualiTemps Inc.</b>		<b>Transaction ID:</b> SB30B.27576 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address PO Box 552		Amount of Each Disbursement this Period 848.00
City Madison State WI Zip Code 53701	Category/ Type	
Purpose of Disbursement Temporary staffing		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2024.00
<b>TOTAL</b> 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)

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<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

<b>A. James Sanders</b> Full Name (Last, First, Middle Initial) Mailing Address 4510 Texas Trail City Madison State WI Zip Code 53704 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Transaction ID: SB30B.27480</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 436.25 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B. James Sanders</b> Full Name (Last, First, Middle Initial) Mailing Address 4510 Texas Trail City Madison State WI Zip Code 53704 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Transaction ID: SB30B.27565</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7 Amount of Each Disbursement this Period 419.86 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C. Charles Triller</b> Full Name (Last, First, Middle Initial) Mailing Address 609 East Gorham St #14 City Madison State WI Zip Code 53703 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Transaction ID: SB30B.27481</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 435.51 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1291.62
<b>TOTAL</b> 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)

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<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

Full Name (Last, First, Middle Initial) <b>A. Charles Triller</b>		<b>Transaction ID:</b> SB30B.27566 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 609 East Gorham St #14		Amount of Each Disbursement this Period 711.25
City Madison State WI Zip Code 53703	Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Rick Wiley</b>		<b>Transaction ID:</b> SB30B.27472 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period 2271.69
City Madison State WI Zip Code 53718	Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Rick Wiley</b>		<b>Transaction ID:</b> SB30B.27556 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 529 Aztalan Drive		Amount of Each Disbursement this Period 2288.74
City Madison State WI Zip Code 53718	Category/ Type	
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5271.68
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. Joshua Wilson</b>		<b>Transaction ID:</b> SB30B.27482 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 641 West Main Street		Amount of Each Disbursement this Period 305.96
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Joshua Wilson</b>		<b>Transaction ID:</b> SB30B.27567 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 641 West Main Street		Amount of Each Disbursement this Period 665.14
City Madison State WI Zip Code 53703	Purpose of Disbursement Payroll	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Wisc. Dept of Revenue</b>		<b>Transaction ID:</b> SB30B.27484 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address PO Box 93208		Amount of Each Disbursement this Period 955.30
City Milwaukee State WI Zip Code 53293	Purpose of Disbursement Payroll tax	
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1926.40
<b>TOTAL</b> 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 51 / 65

<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

Full Name (Last, First, Middle Initial) <b>A. Wisc. Dept of Revenue</b>		<b>Transaction ID:</b> SB30B.27540																					
Mailing Address PO Box 93208		Date of Disbursement																					
City Milwaukee State WI Zip Code 53293		<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>0</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	0	1		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	0		2	0	0	7														
Purpose of Disbursement Payroll tax		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">957.81</td> </tr> </table>		957.81																			
957.81																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) <b>B. Wisc. Dept of Revenue</b>		<b>Transaction ID:</b> SB30B.27569																					
Mailing Address PO Box 93208		Date of Disbursement																					
City Milwaukee State WI Zip Code 53293		<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>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	1		2	0	0	7														
Purpose of Disbursement Payroll tax		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10" style="text-align: right;">1341.54</td> </tr> </table>		1341.54																			
1341.54																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																					
State: District:		<input type="checkbox"/> Other (specify) ▼																					

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

**2299.35**

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

**61433.51**

**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	99000.00	11000.00

**TERMS**

Date Incurred: M M 0 1 D D 0 9 Y Y Y Y 2 0 0 2 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: <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"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>11000.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	<input type="text"/>

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"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>23700.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	<b>34700.00</b>

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)
- X  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)**  
AT&T

Mailing Address  
PO Box 9001309

City State Zip Code  
Louisville KY 40290-1309

Purpose of Disbursement:  
Long distance 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

1832.91

Date 01 / 03 / 2007

Transaction ID: H4.27457

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
384.91		1448.00		1832.91

**B. Full Name (Last, First, Middle Initial)**  
A-1 Moving & Storage

Mailing Address  
PO Box 1242

City State Zip Code  
Appleton WI 54914

Purpose of Disbursement:  
Furniture move

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

2012.91

Date 01 / 12 / 2007

Transaction ID: H4.27488

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.80		142.20		180.00

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

Mailing Address  
4810 Ellestad Drive

City State Zip Code  
Madison WI 53701

Purpose of Disbursement:  
Office light switch repair

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

2141.66

Date 01 / 12 / 2007

Transaction ID: H4.27490

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.04		101.71		128.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
449.75		1691.91		2141.66

**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)**  
AT&T

Mailing Address  
PO Box 9001309

City State Zip Code  
Louisville KY 40290-1309

Purpose of Disbursement:  
Local phone service

Category/  
Type

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

2424.15

Activity or Event Identifier:  
Administrative

Date 01 / 12 / 2007

Transaction ID: H4.27491

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.32		223.17		282.49

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

Mailing Address  
PO Box 9001309

City State Zip Code  
Louisville KY 40290-1309

Purpose of Disbursement:  
Long distance service

Category/  
Type

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

3043.05

Activity or Event Identifier:  
Administrative

Date 01 / 12 / 2007

Transaction ID: H4.27492

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
129.97		488.93		618.90

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

Mailing Address  
PO Box 9001309

City State Zip Code  
Louisville KY 40290-1309

Purpose of Disbursement:  
Phone service - PR1

Category/  
Type

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

3828.94

Activity or Event Identifier:  
Administrative

Date 01 / 12 / 2007

Transaction ID: H4.27493

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.04		620.85		785.89

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
354.33		1332.95		1687.28

**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

<b>A. Full Name (Last, First, Middle Initial)</b> AT&T Capital Services			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 13160 Collections Center Drive			Allocated Activity or Event Year-To-Date 4266.09	
City	State	Zip Code	Category/ Type	
Chicago, IL	60693	IL 60693		
Purpose of Disbursement: Phone equipment rental			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 0 1 / 1 2 / 2 0 0 7	
Activity or Event Identifier: Administrative			Transaction ID: H4.27494	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.80		345.35		437.15

<b>B. Full Name (Last, First, Middle Initial)</b> 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 4408.10	
City	State	Zip Code	Category/ Type	
Chicago	IL	60674		
Purpose of Disbursement: Cable service			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 0 1 / 1 2 / 2 0 0 7	
Activity or Event Identifier: Administrative			Transaction ID: H4.27495	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.82		112.19		142.01

<b>C. Full Name (Last, First, Middle Initial)</b> 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 4874.10	
City	State	Zip Code	Category/ Type	
Madison	WI	53701		
Purpose of Disbursement: Copier toner			Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 0 1 / 1 2 / 2 0 0 7	
Activity or Event Identifier: Administrative			Transaction ID: H4.27498	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.86		368.14		466.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.48		825.68		1045.16

**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

<b>A. Full Name (Last, First, Middle Initial)</b> LexisNexis			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 2314			Allocated Activity or Event Year-To-Date 5104.10		
City Carol Stream	State IL	Zip Code 60132-2314	Date MM / DD / YYYY 01 / 12 / 2007		
Purpose of Disbursement: Subscription fee			Transaction ID: H4.27499		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.30		181.70		230.00

<b>B. Full Name (Last, First, Middle Initial)</b> 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 5738.79		
City Madison	State WI	Zip Code 53701	Date MM / DD / YYYY 01 / 12 / 2007		
Purpose of Disbursement: Electric bill			Transaction ID: H4.27502		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
133.28		501.41		634.69

<b>C. Full Name (Last, First, Middle Initial)</b> 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 8738.79		
City Louisville	State KY	Zip Code 40285	Date MM / DD / YYYY 01 / 12 / 2007		
Purpose of Disbursement: Postage for postage meter			Transaction ID: H4.27503		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
811.58		3053.11		3864.69

**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)**  
West Bend Mutual Insurance

Mailing Address  
1900 South 18th Ave

City State Zip Code  
West Bend WI 53095

Purpose of Disbursement:  
Building liability 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

11001.29

Date 01 / 12 / 2007

Transaction ID: H4.27508

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
475.13		1787.37		2262.50

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

Mailing Address  
PO Box 9001309

City State Zip Code  
Louisville KY 40290-1309

Purpose of Disbursement:  
Long distance services

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

12895.09

Date 01 / 24 / 2007

Transaction ID: H4.27515

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
397.70		1496.10		1893.80

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

Mailing Address  
PO Box 9001309

City State Zip Code  
Louisville KY 40290-1309

Purpose of Disbursement:  
Phone services

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

13669.83

Date 01 / 24 / 2007

Transaction ID: H4.27516

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
162.70		612.04		774.74

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1035.53		3895.51		4931.04

**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)**  
Capital Newspapers

Mailing Address  
PO Box 8759

City	State	Zip Code
Madison	WI	53708

Purpose of Disbursement:  
Newspaper subscription

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

13872.40

Date 01 / 24 / 2007

Transaction ID: H4.27517

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.54		160.03		202.57

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

Mailing Address  
PO Box 1129

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:  
Copies lease - late fees

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

13888.90

Date 01 / 24 / 2007

Transaction ID: H4.27521

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.46		13.04		16.50

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

Mailing Address  
PO Box 9

City	State	Zip Code
Oxford	WI	53952

Purpose of Disbursement:  
Bottled water for office

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

14001.85

Date 01 / 24 / 2007

Transaction ID: H4.27523

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.72		89.23		112.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.72		262.30		332.02

**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

<b>A. Full Name (Last, First, Middle Initial)</b> Office Depot			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 9027			Allocated Activity or Event Year-To-Date 14035.45		
City Des Moines	State IA	Zip Code 50368	Date MM / DD / YYYY 01 / 24 / 2007		
Purpose of Disbursement: Office supplies			Transaction ID: H4.27524		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.06		26.54		33.60

<b>B. Full Name (Last, First, Middle Initial)</b> 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 14258.53		
City Madison	State WI	Zip Code 53718	Date MM / DD / YYYY 01 / 24 / 2007		
Purpose of Disbursement:			Transaction ID: H4.27526		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.85		176.23		223.08

<b>C. Full Name (Last, First, Middle Initial)</b> 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 14887.46		
City Monroe	State WI	Zip Code 53566	Date MM / DD / YYYY 01 / 24 / 2007		
Purpose of Disbursement: Phone service for field office			Transaction ID: H4.27527		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.08		496.85		628.93

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
185.99		699.62		885.61

**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)**  
The Business Journal

Mailing Address  
PO Box 52252

City State Zip Code  
Boulder CO 80322-2252

Purpose of Disbursement:  
Magazine subscription

Category/  
Type

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

14967.46

Activity or Event Identifier:  
Administrative

Date 01 / 24 / 2007

Transaction ID: H4.27528

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.80		63.20		80.00

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

Mailing Address  
PO Box 9001505

City State Zip Code  
Louisville KY 40290

Purpose of Disbursement:  
Waste disposal

Category/  
Type

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

15101.90

Activity or Event Identifier:  
Administrative

Date 01 / 24 / 2007

Transaction ID: H4.27532

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.23		106.21		134.44

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

Mailing Address  
231 W Michigan Street

City State Zip Code  
Milwaukee WI 53203

Purpose of Disbursement:  
Energy bill for field office

Category/  
Type

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

15644.00

Activity or Event Identifier:  
Administrative

Date 01 / 24 / 2007

Transaction ID: H4.27533

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.84		428.26		542.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
158.87		597.67		756.54

**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

<b>A. Full Name (Last, First, Middle Initial)</b> Earthscapes			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 683			Allocated Activity or Event Year-To-Date 15854.00		
City Marshall	State WI	Zip Code 53559	Date <input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Snow removal			Transaction ID: H4.27534		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.10		165.90		210.00

<b>B. Full Name (Last, First, Middle Initial)</b> 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 16354.00		
City Menasha	State WI	Zip Code 54952	Date <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Janitorial Services			Transaction ID: H4.27574		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> Shred-it			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 21 Marsh Court			Allocated Activity or Event Year-To-Date 16949.00		
City Madison	State WI	Zip Code 53718	Date <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>		
Purpose of Disbursement: Document disposal			Transaction ID: H4.27577		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
124.95		470.05		595.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
274.05		1030.95		1305.00

**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)**  
State of Wisconsin - Office of the Governor

Mailing Address  
State Capitol - 115 East

City	State	Zip Code
Madison	WI	53702

Purpose of Disbursement:  
Document copies

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  
17095.75

Date  /  /   
**Transaction ID:** H4.27578

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.82		115.93		146.75

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

Mailing Address  
231 W Michigan Street

City	State	Zip Code
Milwaukee	WI	53203

Purpose of Disbursement:  
Energy bill for field office

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  
17327.76

Date  /  /   
**Transaction ID:** H4.27580

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.72		183.29		232.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.54		299.22		378.76

**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
3638.84		13688.92		17327.76

Image# 27990470286

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

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