

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Reform America Fund

ADDRESS (number and street) N4298 12 Corners Rd
Check if different than previously reported. (ACC) Black Creek WI 54106-8100

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00581934 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on **11** / **08** / **2016** in the State of **WI**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period **10** / **01** / **2016** through **10** / **19** / **2016**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Pickens, Lorri, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Pickens, Lorri, , ,* [Electronically Filed] Date **10** / **27** / **2016**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Reform America Fund

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2016"/> | | 12410.47 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 18115.72 | |
| (c) Total Receipts (from Line 19) | 4093812.47 | 5829922.47 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 4111928.19 | 5842332.94 |
| 7. Total Disbursements (from Line 31)..... | 3862977.50 | 5593382.25 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 248950.69 | 248950.69 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Reform America Fund

Report Covering the Period: From: 10 / 01 / 2016 To: 10 / 19 / 2016

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 4093500.00 | 5828750.00 |
| (ii) Unitemized | 300.00 | 1160.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 4093800.00 | 5829910.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 4093800.00 | 5829910.00 |
| 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)..... | 12.47 | 12.47 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 4093812.47 | 5829922.47 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 4093812.47 | 5829922.47 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 71994.40 | 132585.40 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 71994.40 | 132585.40 |
| 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 Expenditures (use Schedule E) | 3423483.10 | 4716944.87 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations)..... | 367500.00 | 743851.98 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 3862977.50 | 5593382.25 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 3862977.50 | 5593382.25 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 4093800.00 | 5829910.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4093800.00 | 5829910.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 71994.40 | 132585.40 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 12.47 | 12.47 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 71981.93 | 132572.93 |

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 17 |
| | <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)
Reform America Fund

A. Landry, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W238 N3239 High Meadow Ct
 City Pewaukee State WI Zip Code 53072-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 03 / 2016
Transaction ID : AF37E4CBD653E4857ACA
 Amount of Each Receipt this Period 800.00
 Memo Item

B. Hendricks, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 65
 City Afton State WI Zip Code 53501-0065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hendricks Holding Co., Inc. Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2648500.00

Date of Receipt 10 / 03 / 2016
Transaction ID : AC43AD83EB43B4FD7A10
 Amount of Each Receipt this Period 1273500.00
 Memo Item

C. Hendricks, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 65
 City Afton State WI Zip Code 53501-0065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hendricks Holding Co., Inc. Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4044600.00

Date of Receipt 10 / 06 / 2016
Transaction ID : AB1E4CAD10CD04FC1AE3
 Amount of Each Receipt this Period 1396100.00
 Memo Item

| | |
|---|------------|
| SUBTOTAL of Receipts This Page (optional)..... | 2670400.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 17
 (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)
Reform America Fund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hendricks, Diane, , ,

Mailing Address PO Box 65

| | | |
|---------------|-------------|------------------------|
| City Afton | State WI | Zip Code 53501-0065 |
|---------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) Hendricks Holding Co., Inc. | Occupation (for Individual) Chairman |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5467700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 13 / 2016

Transaction ID : AC2D4485E575B4EFAB56

Amount of Each Receipt this Period
 1423100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

| | |
|---|------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1423100.00 |
| TOTAL This Period (last page this line number only)..... | 4093500.00 |

**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"/> 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)
Reform America Fund

Full Name (Last, First, Middle Initial)

A. Professional Data Services

Mailing Address 824 S Millledge Ave
Ste 101

City Athens State GA Zip Code 30605-1332

Purpose of Disbursement
PAC Compliance Consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2016

FEC Identification Number

C
Transaction ID : BE1CF39C70
Amount of Each Disbursement this Period
3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
PAC Software

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2016

FEC Identification Number

C
Transaction ID : BDD5564591C
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Connectivist

Mailing Address 544 E. Ogden Avenue

City Milwaukee State WI Zip Code 53202-2698

Purpose of Disbursement
PAC Website Design & Digital Consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2016

FEC Identification Number

C
Transaction ID : BC1D647CC1
Amount of Each Disbursement this Period
3250.00

Memo Item

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

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

6500.00

**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"/> 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)
Reform America Fund

A. Doner Fundraising

Full Name (Last, First, Middle Initial)

Mailing Address 815 Brazos Ste 701

City Austin State TX Zip Code 78701-2509

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : B8326524EA

Amount of Each Disbursement this Period: 10000.00

Memo Item

B. Godfrey & Kahn, SC

Full Name (Last, First, Middle Initial)

Mailing Address 780 N Water Street

City Milwaukee State WI Zip Code 53202-3512

Purpose of Disbursement PAC Legal Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : BC51B057DD

Amount of Each Disbursement this Period: 450.00

Memo Item

C. Johnson & Jordahl, LLC

Full Name (Last, First, Middle Initial)

Mailing Address N7130 N Lost Lake Rd

City Randolph State WI Zip Code 53956-9679

Purpose of Disbursement PAC Strategy Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2016

FEC Identification Number: C

Transaction ID : B94C0617CE

Amount of Each Disbursement this Period: 10000.00

Memo Item

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

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

20450.00

**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"/> 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)
Reform America Fund

A. Stitt, Mary, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1478 Noridge Trail

City Port Washington State WI Zip Code 53074-1371

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 05 / 2016

FEC Identification Number C

Transaction ID : B75673A41A

Amount of Each Disbursement this Period 5000.00

Memo Item

B. Gralton, Laura, , ,

Full Name (Last, First, Middle Initial)

Mailing Address N60 W39698 Mary Lane

City Oconomowoc State WI Zip Code 53066-2120

Purpose of Disbursement PAC Strategy Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 05 / 2016

FEC Identification Number C

Transaction ID : B4AC6C54A6

Amount of Each Disbursement this Period 7500.00

Memo Item

C. NMB Research, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 206 N. Fayette St

City Alexandria State VA Zip Code 22314-2433

Purpose of Disbursement PAC Polling

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 05 / 2016

FEC Identification Number C

Transaction ID : BD6645EA6F

Amount of Each Disbursement this Period 27500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40000.00

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 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)
Reform America Fund

A. Champion Group, LLC.

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1651

City Madison State WI Zip Code 53701-1651

Purpose of Disbursement PAC Strategy Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2016

FEC Identification Number: C

Transaction ID : B46A932C07

Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

TOTAL This Period (last page this line number only)..... ▶ 71950.00

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

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NAME OF COMMITTEE (In Full)
Reform America Fund

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. Reform Wisconsin Fund | | Date of Disbursement MM / DD / YYYY 10 / 05 / 2016 | |
| Mailing Address N4298 12 Corners Rd | | | |
| City Black Creek | State WI | Zip Code 54106-8100 | |
| Purpose of Disbursement Contribution | | <input type="checkbox"/> 011 | FEC Identification Number C |
| Candidate Name | | Category/ Type | Transaction ID : B65165484EE Amount of Each Disbursement this Period 1500.00 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | <input type="checkbox"/> Memo Item |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. Reform Wisconsin Fund | | Date of Disbursement MM / DD / YYYY 10 / 03 / 2016 | |
| Mailing Address N4298 12 Corners Rd | | | |
| City Black Creek | State WI | Zip Code 54106-8100 | |
| Purpose of Disbursement Contribution | | <input type="checkbox"/> 011 | FEC Identification Number C |
| Candidate Name | | Category/ Type | Transaction ID : B3A1F1703C! Amount of Each Disbursement this Period 366000.00 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | <input type="checkbox"/> Memo Item |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY | |
| Mailing Address | | | |
| City | State | Zip Code | |
| Purpose of Disbursement | | <input type="checkbox"/> | FEC Identification Number C |
| Candidate Name | | Category/ Type | Amount of Each Disbursement this Period |
| 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: | | | <input type="checkbox"/> Memo Item |

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 367500.00 |
| TOTAL This Period (last page this line number only).....▶ | 367500.00 |

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|---|--|
| NAME OF COMMITTEE (In Full) Reform America Fund | FEC IDENTIFICATION NUMBER ▼ C C00581934 |
|---|--|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | |
|---|--|
| Full Name of Payee Nonbox <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 5307 S 92nd St | Amount <input type="text"/> 411668.25 Transaction ID : EFF45A3F493C44920A4B Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City Hales Corners State WI Zip Code 53130-1677 | |
| Purpose of Expenditure Media Buy Category/Type <input type="text"/> | |
| Name of Federal Candidate: Clinton, Hillary Rodham, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2088443.10 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|---|---|
| Full Name of Payee Fedex <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 3875 Airways | Amount <input type="text"/> 26.75 Transaction ID : EB AE49A762FF94061B96 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City Memphis State TN Zip Code 38116-5070 | |
| Purpose of Expenditure Shipping Category/Type <input type="text"/> | |
| Name of Federal Candidate: Clinton, Hillary Rodham, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2088443.10 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | <input type="text"/> 411695.00 |
| (a) SUBTOTAL of Unitemized Independent Expenditures | <input type="text"/> |
| (a) TOTAL Independent Expenditures | <input type="text"/> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pickens, Lorri, , , **[Electronically Filed]** Date / /

 Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|---|---|
| NAME OF COMMITTEE (In Full) Reform America Fund | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00581934 </div> |
|---|---|

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | | | | | | |
|---|--|------------|----------|----------|---------------|----|------------|
| Full Name of Payee <input type="checkbox"/> Memo Item Nonbox | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 10 / 2016 | | | | | | |
| Mailing Address 5307 S 92nd St | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1021155.84</div> Transaction ID : E4DC8583839D04C7A89B Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2016 | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Hales Corners</td> <td>WI</td> <td>53130-1677</td> </tr> </table> | | City | State | Zip Code | Hales Corners | WI | 53130-1677 |
| City | | State | Zip Code | | | | |
| Hales Corners | WI | 53130-1677 | | | | | |
| Purpose of Expenditure Media Buy | | | | | | | |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Clinton, Hillary Rodham, , , | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: | | | | | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3109598.94</div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | | | | | |

| | | | | | | | |
|---|---|------------|----------|----------|---------------|----|------------|
| Full Name of Payee <input type="checkbox"/> Memo Item Nonbox | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 | | | | | | |
| Mailing Address 5307 S 92nd St | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">310728.59</div> Transaction ID : E124D5973487D436999A Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016 | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Hales Corners</td> <td>WI</td> <td>53130-1677</td> </tr> </table> | | City | State | Zip Code | Hales Corners | WI | 53130-1677 |
| City | | State | Zip Code | | | | |
| Hales Corners | WI | 53130-1677 | | | | | |
| Purpose of Expenditure Media Buy and Production | | | | | | | |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Clinton, Hillary Rodham, , , | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: | | | | | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3420327.53</div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | | | | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;">1331884.43</div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |
| (a) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pickens, Lorri, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|---|---|
| NAME OF COMMITTEE (In Full) Reform America Fund | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00581934 </div> |
|---|---|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | | | | |
|--|---|-----------------------|------------------------|------------------------|
| Full Name of Payee <input type="checkbox"/> Memo Item Nonbox | Date of Public Distribution/Dissemination 10 / 17 / 2016 | | | |
| Mailing Address 5307 S 92nd St | Amount 1199212.30 | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Hales Corners</td> <td style="width:17%; border-bottom: 1px solid black;">State WI</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 53130-1677</td> </tr> </table> | | City Hales Corners | State WI | Zip Code 53130-1677 |
| City Hales Corners | | State WI | Zip Code 53130-1677 | |
| Purpose of Expenditure Media Buy and Production | | | | |
| Name of Federal Candidate: Feingold, Russ, , , | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | | |
| 1296617.34 | | | | |

| | | | | |
|--|---|-----------------------|------------------------|------------------------|
| Full Name of Payee <input type="checkbox"/> Memo Item Nonbox | Date of Public Distribution/Dissemination 10 / 17 / 2016 | | | |
| Mailing Address 5307 S 92nd St | Amount 90131.25 | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Hales Corners</td> <td style="width:17%; border-bottom: 1px solid black;">State WI</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 53130-1677</td> </tr> </table> | | City Hales Corners | State WI | Zip Code 53130-1677 |
| City Hales Corners | | State WI | Zip Code 53130-1677 | |
| Purpose of Expenditure Media Buy and Production | | | | |
| Name of Federal Candidate: Feingold, Russ, , , | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | | |
| 1296617.34 | | | | |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | 1289343.55 |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (a) TOTAL Independent Expenditures ▶ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pickens, Lorri, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|---|--|
| NAME OF COMMITTEE (In Full) Reform America Fund | FEC IDENTIFICATION NUMBER ▼ C C00581934 |
|---|--|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | |
|---|--|
| Full Name of Payee <input type="checkbox"/> Memo Item Nonbox | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 5307 S 92nd St | Amount <input type="text"/> |
| City Hales Corners State WI Zip Code 53130-1677 | Transaction ID : ECC5F00767ED144F9BB7 |
| Purpose of Expenditure Media Buy and Production Category/Type <input type="text"/> | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Name of Federal Candidate: Feingold, Russ, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <input type="text"/> State: WI |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1296617.34 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <input type="text"/> |

| | |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address | Amount <input type="text"/> |
| City State Zip Code | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Purpose of Expenditure Category/Type <input type="text"/> | |
| Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: <input type="text"/> State: <input type="text"/> |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ <input type="text"/> |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures | <input type="text"/> 7273.79 |
| (a) SUBTOTAL of Unitemized Independent Expenditures | <input type="text"/> |
| (a) TOTAL Independent Expenditures | <input type="text"/> 3423483.10 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pickens, Lorri, , **[Electronically Filed]** Date / /
 Signature