REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. Name of individual, organization or corporation: Chris Abele

Address (number and street): 1301 N. Astor Suite 23 ☐ check if different than previously reported

City, State and ZIP Code: Milwaukee, WI 53202

2. Corporate filers only: Is the filer a qualified nonprofit corporation? ☐ Yes ☒ No

Individual filers only: NAME OF EMPLOYER: Self-Employed OCCUPATION: Philanthropist

3. Identification number: C9000 6669

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report ☐ 12-Day Report preceding the election.
☐ July 15 Quarterly Report
☒ October 15 Quarterly Report
☐ January 31 Year-End Report ☐ 30-Day Report following the General Election.
☐ July 31 Mid-Year Report

Type of Election | Date of Election | State

Date of Election | State

(b) Is this Report an amendment? Yes ☒ No ☐

5. COVERING PERIOD: FROM THROUGH OCT 15 PAGE 1 OF 1

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One: Support	Check One: Oppose	Name and Office Sought (District, State) of Federal Candidate
McGlinchey + Associates, Inc. 16455 W. Bluemound Brookfield, WI 53005	Billboard Campaign	Aug 31	514.25		✓	Bush/ President of U.S.

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) ..... $ 0

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) ..... $ 514.25

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they manifest the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM: Chris Abele

SIGNATURE (multi-page filers: sign page 1 only) / DATE

Subscribed and sworn to before me this 31 day of January 19 2001

My Commission Expires 7-27-2003

Timothy A Hasel

Notary Public

TIMOTHY HASEL NOTARY PUBLIC STATE OF WISCONSIN