

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Wisconsin Medical Society Political Action Committee

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="2015"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="13970.00"/>	<input type="text" value="13970.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="13970.00"/>	<input type="text" value="13970.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13970.00"/>	<input type="text" value="13970.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Wisconsin Medical Society Political Action Committee

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

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).....	13970.00	13970.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13970.00	13970.00
(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)	13970.00	13970.00
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).....	0.00	0.00
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))..... ▶	13970.00	13970.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13970.00	13970.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13970.00	13970.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) 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)) ..	13970.00	13970.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13970.00	13970.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	13970.00	13970.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13970.00	13970.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 97
	(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"/> 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)
Wisconsin Medical Society Political Action Committee

A. Doctor Robert T. McQueeney
 Full Name (Last, First, Middle Initial)
 Mailing Address 1602 Main St
 PO Box 1197
 City Marinette State WI Zip Code 54143-1806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Integrated Mental Health Service SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2015
Transaction ID : 7216024
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ron Johnson for Senate Inc

B. Bradley L Manning Jr.,MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1108 Nishishin Tr NE
 City Monona State WI Zip Code 53716-2981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UW Health-1 S Park-Plastic Surgery Cli Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : 7216027
 Amount of Each Receipt this Period
 100.00
 Earmarked for Tammy Baldwin for Senate

c. Ms. Linda Syth
 Full Name (Last, First, Middle Initial)
 Mailing Address 374 Oakwood Dr
 City Oregon State WI Zip Code 53575-3431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society Occupation CEO
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : 7216028
 Amount of Each Receipt this Period
 250.00
 Earmarked for Ribble for Congress

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Wisconsin Medical Society Political Action Committee

A. Doctor Jerry Lee Halverson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5710 Pembroke Dr
 City Fitchburg State WI Zip Code 53711-5222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rogers Memorial Hospital - Oconomowoc Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015
Transaction ID : 7216029
 Amount of Each Receipt this Period
 250.00
 Earmarked for Pocan for Congress

B. Doctor Kim M. Hetsko
 Full Name (Last, First, Middle Initial)
 Mailing Address 2045 Atwood Ave Apt 208
 City Madison State WI Zip Code 53704-6623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015
Transaction ID : 7216030
 Amount of Each Receipt this Period
 100.00
 Earmarked for Pocan for Congress

C. Doctor Gregg Alan Bogost
 Full Name (Last, First, Middle Initial)
 Mailing Address 6203 S Highlands Ave
 City Madison State WI Zip Code 53705-1114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Madison Radiologists SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2015
Transaction ID : 7216031
 Amount of Each Receipt this Period
 100.00
 Earmarked for Pocan for Congress

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)
A. Doctor Jay A. Gold

Mailing Address 3100 Lake Mendota Dr. #705

City Madison	State WI	Zip Code 53705-1462
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FEC ID number of contributing federal political committee. **C**

Name of Employer MetaStar Inc	Occupation Physician
----------------------------------	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : 7216032

Amount of Each Receipt this Period
50.00

Earmarked for Russ Feingold for Wisconsin

Full Name (Last, First, Middle Initial)
B. Doctor Sridhar V. Vasudevan

Mailing Address 5200 Upper Lakeview Ridge Rd

City Belgium	State WI	Zip Code 53004-9001
-----------------	-------------	------------------------

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

Name of Employer Froedtert & The Medical College of Wis	Occupation Physician
--	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2015

Transaction ID : 7216034

Amount of Each Receipt this Period
125.00

Earmarked for Ron Johnson for Senate Inc

Full Name (Last, First, Middle Initial)
C. Doctor Sandra L. Osborn

Mailing Address 2085 County Road J

City Verona	State WI	Zip Code 53593-8829
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FEC ID number of contributing federal political committee. **C**

Name of Employer UW School of Medicine and Public Heat	Occupation Physician
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Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2015

Transaction ID : 7216035

Amount of Each Receipt this Period
75.00

Earmarked for Russ for Wisconsin Inc

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Mr. William (Rick) Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 University Ave
 City Madison State WI Zip Code 53705-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society Occupation CEO
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2015
Transaction ID : 7216036
 Amount of Each Receipt this Period
 500.00
 Earmarked for Pocan for Congress

B. Richard Guy Roberts MD,JD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 BellWest Blvd
 City Belleville State WI Zip Code 53508-9433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UW Health-Belleville Family Medical Cl Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2015
Transaction ID : 7216037
 Amount of Each Receipt this Period
 250.00
 Earmarked for Pocan for Congress

C. Doctor Susan Lee Turney
 Full Name (Last, First, Middle Initial)
 Mailing Address 4535 Winnequah Rd
 City Monona State WI Zip Code 53716-2025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marshfield Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2015
Transaction ID : 7216038
 Amount of Each Receipt this Period
 100.00
 Earmarked for Pocan for Congress

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Richard A. Dart
 Full Name (Last, First, Middle Initial)
 Mailing Address 9050 Ader Ln
 City Marshfield State WI Zip Code 54449-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marshfield Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2015
Transaction ID : 7216039
 Amount of Each Receipt this Period
 250.00
 Earmarked for Pocan for Congress

B. Dr. Jennifer Lynn Kirsch
 Full Name (Last, First, Middle Initial)
 Mailing Address 424 Country Club Ln
 City Onalaska State WI Zip Code 54650-8791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gundersen Health System Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : 7216040
 Amount of Each Receipt this Period
 1000.00
 Earmarked for Kind for Congress

C. Doctor Richard A. Dart
 Full Name (Last, First, Middle Initial)
 Mailing Address 9050 Ader Ln
 City Marshfield State WI Zip Code 54449-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marshfield Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : 7216041
 Amount of Each Receipt this Period
 150.00
 Earmarked for Kind for Congress

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Sandra L. Osborn
 Full Name (Last, First, Middle Initial)
 Mailing Address 2085 County Road J
 City Verona State WI Zip Code 53593-8829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UW School of Medicine and Public Health Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : 7216042
 Amount of Each Receipt this Period
 100.00
 Earmarked for Pocan for Congress

B. Doctor Sridhar V. Vasudevan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5200 Upper Lakeview Ridge Rd
 City Belgium State WI Zip Code 53004-9001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Froedtert & The Medical College of Wis Occupation Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216043
 Amount of Each Receipt this Period
 50.00
 Earmarked for Republican National Committee

c. Dr. Gregory A. Shove
 Full Name (Last, First, Middle Initial)
 Mailing Address 1444 Valley View Dr
 City Mount Pleasant State WI Zip Code 53405-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216044
 Amount of Each Receipt this Period
 50.00
 Earmarked for Ron Johnson for Senate

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor David Galbis-Reig
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 53rd Ave
 City Kenosha State WI Zip Code 53144-5201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wheaton Franciscan Medical Group - Fam Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216045
 Amount of Each Receipt this Period
 550.00
 Earmarked for Ron Johnson for Senate

B. Bruce Allan Kraus MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1511 Park Ave
 City Columbus State WI Zip Code 53925-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bruce A. Kraus MD Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216046
 Amount of Each Receipt this Period
 150.00
 Earmarked for Ron Johnson for Senate

C. Doctor David Martin Hoffmann
 Full Name (Last, First, Middle Initial)
 Mailing Address W7876 Highway O
 City Mauston State WI Zip Code 53948-9328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mile Bluff Medical Center Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216047
 Amount of Each Receipt this Period
 150.00
 Earmarked for Ron Johnson for Senate

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Kenneth J. Pechman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2949 Oak Stream Dr
 City De Pere State WI Zip Code 54115-8124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dermatology Associates of Wisconsin - Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216048
 Amount of Each Receipt this Period
 75.00
 Earmarked for Ron Johnson for Senate

B. Doctor Robert Alan McDonald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1718 Hilton Head Dr
 City Madison State WI Zip Code 53719-4438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dean Clinic - West Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216049
 Amount of Each Receipt this Period
 75.00
 Earmarked for Ron Johnson for Senate

c. Dr. Tiffany Marie Ludka-Gaulke
 Full Name (Last, First, Middle Initial)
 Mailing Address 504 Oriole Ln
 City Wausau State WI Zip Code 54401-7418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marshfield Clinic-Mosinee Center Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216050
 Amount of Each Receipt this Period
 75.00
 Earmarked for Ron Johnson for Senate

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

A. Doctor Stephen Burtis Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address N2062 Wedgewood Dr E
 City La Crosse State WI Zip Code 54601-7175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 7216051
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ron Johnson

B. Doctor George Melvin Lange
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 W Green Tree Rd
 City River Hills State WI Zip Code 53217-3721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CSM Westgate Medical Group Occupation Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2015
Transaction ID : 7216102
 Amount of Each Receipt this Period
 1000.00
 Earmarked for AMPAC

C. Doctor Noel Nain Deep
 Full Name (Last, First, Middle Initial)
 Mailing Address 810 Violet Way
 City Antigo State WI Zip Code 54409-9500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aspirus General Clinic - Antigo Occupation Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2015
Transaction ID : 7216103
 Amount of Each Receipt this Period
 1000.00
 Earmarked for ACP Services PAC

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
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 15 OF 97
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Robert John Jaeger
 Full Name (Last, First, Middle Initial)
 Mailing Address 1418 W Chippewa Trl
 City Mosinee State WI Zip Code 54455-9418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015
Transaction ID : 7216104
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ron Johnson for Senate

B. Doctor William Edward Raduege
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 553
 City Woodruff State WI Zip Code 54568-0553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer W. E. Raduege MD SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216105
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ribble for Congress

C. Doctor Kenneth J. Pechman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2949 Oak Stream Dr
 City De Pere State WI Zip Code 54115-8124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dermatology Associates of Wisconsin - Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216106
 Amount of Each Receipt this Period
 70.00
 Earmarked for Ribble for Congress

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

A. Dr. Stephen Moore Lindsey
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 270590

City Hartford	State WI	Zip Code 53027-0590
FEC ID number of contributing federal political committee. C		
Name of Employer Stephen M Lindsey MD SC	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Date of Receipt
01 / 15 / 2015
Transaction ID : 7216107

Amount of Each Receipt this Period
100.00

Earmarked for Ribble for Congress

B. Doctor David Martin Hoffmann
Full Name (Last, First, Middle Initial)
Mailing Address W7876 Highway O

City Mauston	State WI	Zip Code 53948-9328
FEC ID number of contributing federal political committee. C		
Name of Employer Mile Bluff Medical Center	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Date of Receipt
01 / 15 / 2015
Transaction ID : 7216108

Amount of Each Receipt this Period
200.00

Earmarked for Ribble for Congress

C. Doctor Gerald Paul Clarke
Full Name (Last, First, Middle Initial)
Mailing Address W7056 Firelane #3

City Menasha	State WI	Zip Code 54952
FEC ID number of contributing federal political committee. C		
Name of Employer Ophthalmic Surgery of Wisconsin LTD	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Date of Receipt
01 / 15 / 2015
Transaction ID : 7216109

Amount of Each Receipt this Period
200.00

Earmarked for Ribble for Congress

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

A. Doctor George Melvin Lange
Full Name (Last, First, Middle Initial)
Mailing Address 1200 W Green Tree Rd
City River Hills State WI Zip Code 53217-3721
FEC ID number of contributing federal political committee. **C**
Name of Employer CSM Westgate Medical Group Occupation Physician
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2015
Transaction ID : 7216110
Amount of Each Receipt this Period
100.00
Earmarked for Ribble for Congress

B. Milind S Shah MD,FACC,FA
Full Name (Last, First, Middle Initial)
Mailing Address 1000 N Oak Ave
City Marshfield State WI Zip Code 54449-5703
FEC ID number of contributing federal political committee. **C**
Name of Employer Marshfield Clinic Occupation Physician
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2015
Transaction ID : 7216111
Amount of Each Receipt this Period
250.00
Earmarked for Ribble for Congress

c. Dr. Gregory A. Shove
Full Name (Last, First, Middle Initial)
Mailing Address 1444 Valley View Dr
City Mount Pleasant State WI Zip Code 53405-1743
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Physician
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2015
Transaction ID : 7216112
Amount of Each Receipt this Period
50.00
Earmarked for Ribble for Congress

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

A. Doctor Stephen Burtis Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address N2062 Wedgewood Dr E
 City La Crosse State WI Zip Code 54601-7175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216113
 Amount of Each Receipt this Period
 50.00
 Earmarked for Ribble for Congress

B. Doctor Suzanne Jean Martens
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Lake Breeze Ln
 City Random Lake State WI Zip Code 53075-1679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Infinity-St Nicholas Hospital Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216114
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ribble for Congress

C. Doctor Jeffrey Ward Kalenak
 Full Name (Last, First, Middle Initial)
 Mailing Address 17945 Lisa Ln
 City Brookfield State WI Zip Code 53045-1242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Drs Massaro & Kalenak SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216115
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ribble for Congress

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 19 OF 97
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Louis-Marcel A. Cesar
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 180253
 City Delafield State WI Zip Code 53018-0253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Emergency Medicine Specialists SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216116
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ribble for Congress

B. Ms. Sherry Clarke
 Full Name (Last, First, Middle Initial)
 Mailing Address 9724 Rias Way
 City Austin State TX Zip Code 78717-3998
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ophthalmic Surgery of Wisconsin LTD Occupation Nurse
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216117
 Amount of Each Receipt this Period
 50.00
 Earmarked for Ribble for Congress

C. Dr. Jeffrey E. Rodzak
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 E Larkspur Ln
 City Onalaska State WI Zip Code 54650-8303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gunderson Onalaska Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216118
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ribble for Congress

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

A. Frederic William Schmidt MD,FACS
 Full Name (Last, First, Middle Initial)
 Mailing Address 630 Chantilly Ave
 City Green Bay State WI Zip Code 54301-1432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NEW ENT SC Medical Staff Leadership - Bylaws
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216119
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ribble for Congress

B. Doctor Allan Bertram Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4585 Fox Bluff Lane
 City Middleton State WI Zip Code 53562-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : 7216120
 Amount of Each Receipt this Period
 300.00
 Earmarked for Pocan for Congress

C. Doctor Sandra L. Osborn
 Full Name (Last, First, Middle Initial)
 Mailing Address 2085 County Road J
 City Verona State WI Zip Code 53593-8829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UW School of Medicine and Public Heat Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : 7216124
 Amount of Each Receipt this Period
 25.00
 Earmarked for Tammy Baldwin for Senate

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Donn David Dexter
 Full Name (Last, First, Middle Initial)
 Mailing Address 7410 Lakeview Dr
 City Eau Claire State WI Zip Code 54701-8329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mayo Clinic Health System - Luther Cam Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : 7216270
 Amount of Each Receipt this Period
 100.00
 Earmarked for Kind for Congress

B. Ann H Hoffmann MD
 Full Name (Last, First, Middle Initial)
 Mailing Address W7876 Highway O
 City Mauston State WI Zip Code 53948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mile Bluff Medical Center Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : 7216271
 Amount of Each Receipt this Period
 100.00
 Earmarked for Kind for Congress

C. Doctor Stephen Burtis Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address N2062 Wedgewood Dr E
 City La Crosse State WI Zip Code 54601-7175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : 7216272
 Amount of Each Receipt this Period
 50.00
 Earmarked for Kind for Congress

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Timothy Lisle Bartholow
 Full Name (Last, First, Middle Initial)
 Mailing Address 714 Dunning St
 City Madison State WI Zip Code 53704-5614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WEA Trust Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 03 / 30 / 2015
Transaction ID : 7216273
 Amount of Each Receipt this Period
 175.00
 Earmarked for Tammy Baldwin for Senate

B. Doctor Louis-Marcel A. Cesar
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 180253
 City Delafield State WI Zip Code 53018-0253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Emergency Medicine Specialists SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 03 / 30 / 2015
Transaction ID : 7216274
 Amount of Each Receipt this Period
 150.00
 Earmarked for Tammy Baldwin for Senate

C. Doctor Clarence Paul Chou
 Full Name (Last, First, Middle Initial)
 Mailing Address 10028 N Miller Dr 2W
 City Mequon State WI Zip Code 53092-6186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clarence P Chou MD Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 03 / 30 / 2015
Transaction ID : 7216275
 Amount of Each Receipt this Period
 100.00
 Earmarked for Tammy Baldwin for Senate

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial) A. Doctor Richard A. Dart		Date of Receipt MM / DD / YYYY 03 / 30 / 2015 Transaction ID : 7216276
Mailing Address 9050 Ader Ln		Amount of Each Receipt this Period 150.00
City Marshfield	State WI	Zip Code 54449-9652
FEC ID number of contributing federal political committee. C		Earmarked for Tammy Baldwin for Senate
Name of Employer Marshfield Clinic	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Doctor Donn David Dexter		Date of Receipt MM / DD / YYYY 03 / 30 / 2015 Transaction ID : 7216277
Mailing Address 7410 Lakeview Dr		Amount of Each Receipt this Period 100.00
City Eau Claire	State WI	Zip Code 54701-8329
FEC ID number of contributing federal political committee. C		Earmarked for Tammy Baldwin for Senate
Name of Employer Mayo Clinic Health System - Luther Cam	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Doctor Jay A. Gold		Date of Receipt MM / DD / YYYY 03 / 30 / 2015 Transaction ID : 7216278
Mailing Address 3100 Lake Mendota Dr. #705		Amount of Each Receipt this Period 50.00
City Madison	State WI	Zip Code 53705-1462
FEC ID number of contributing federal political committee. C		Earmarked for Tammy Baldwin for Senate
Name of Employer MetaStar Inc	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Marlene Dolores Melzer-Lange
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 W Green Tree Rd
 City River Hills State WI Zip Code 53217-3721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Children's Hospital of Wisconsin-Emerg Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : 7216279
 Amount of Each Receipt this Period
 100.00
 Earmarked for Tammy Baldwin for Senate

B. Doctor Paul A. Wertsch
 Full Name (Last, First, Middle Initial)
 Mailing Address 4221 Venetian Ln
 City Madison State WI Zip Code 53718-6655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wildwood Family Clinic SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : 7216280
 Amount of Each Receipt this Period
 100.00
 Earmarked for Tammy Baldwin for Senate

C. Doctor Timothy Lisle Bartholow
 Full Name (Last, First, Middle Initial)
 Mailing Address 714 Dunning St
 City Madison State WI Zip Code 53704-5614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WEA Trust Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : 7216281
 Amount of Each Receipt this Period
 200.00
 Earmarked for Pocan for Congress

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)
A. Doctor Donn David Dexter

Mailing Address 7410 Lakeview Dr

City Eau Claire State WI Zip Code 54701-8329

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

Name of Employer Mayo Clinic Health System - Luther Cam Occupation Physician

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt
03 / 30 / 2015

Transaction ID : 7216282

Amount of Each Receipt this Period
100.00

Earmarked for Pocan for Congress

Full Name (Last, First, Middle Initial)
B. Mr. Chris A. Rasch

Mailing Address 2018 North 2nd St

City Milwaukee State WI Zip Code 53212-3206

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

Name of Employer Wisconsin Medical Society Occupation Director of State and Federal Relation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt
03 / 30 / 2015

Transaction ID : 7216283

Amount of Each Receipt this Period
100.00

Earmarked for Pocan for Congress

Full Name (Last, First, Middle Initial)
C. Doctor Martha (Molli) Leigh Rolli

Mailing Address 4322 Rolla Ln

City Madison State WI Zip Code 53711-2812

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

Name of Employer Mendota Mental Health Inst Occupation Physician

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt
03 / 30 / 2015

Transaction ID : 7216284

Amount of Each Receipt this Period
75.00

Earmarked for Tammy Baldwin for Senate

SUBTOTAL of Receipts This Page (optional)..... ▶ **275.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Dr. Kevin Thomas Flaherty
 Full Name (Last, First, Middle Initial)
 Mailing Address 1206 Highland Park Blvd
 City Wausau State WI Zip Code 54403-5087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Eye Clinic of Wisconsin SC - Wausau Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : 7216285
 Amount of Each Receipt this Period
 250.00
 Earmarked for Duffy for Congress

B. Mr. William (Rick) Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 University Ave
 City Madison State WI Zip Code 53705-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wisconsin Medical Society Occupation CEO
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : 7216286
 Amount of Each Receipt this Period
 250.00
 Earmarked for Duffy for Congress

C. Doctor Gerald Paul Clarke
 Full Name (Last, First, Middle Initial)
 Mailing Address W7056 Firelane #3
 City Menasha State WI Zip Code 54952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ophthalmic Surgery of Wisconsin LTD Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : 7216287
 Amount of Each Receipt this Period
 100.00
 Earmarked for Duffy for Congress

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

A. Doctor Yakub Abdulmasih Ellias
 Full Name (Last, First, Middle Initial)
 Mailing Address 1123 Onstad Dr
 City Marshfield State WI Zip Code 54449-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marshfield Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : 7216288
 Amount of Each Receipt this Period
 100.00
 Earmarked for Duffy for Congress

B. Dr. Laurence Ross Gordon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1809 Statesman Dr
 City Wausau State WI Zip Code 54403-5132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aspirus Weston Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : 7216289
 Amount of Each Receipt this Period
 500.00
 Earmarked for Duffy for Congress

C. Doctor David Martin Hoffmann
 Full Name (Last, First, Middle Initial)
 Mailing Address W7876 Highway O
 City Mauston State WI Zip Code 53948-9328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mile Bluff Medical Center Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : 7216290
 Amount of Each Receipt this Period
 150.00
 Earmarked for Duffy for Congress

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 97
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial) A. Doctor Arne T. Lagus		Date of Receipt
Mailing Address 231 Day Rd N		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Saint Croix Falls	WI	54024-9133
FEC ID number of contributing federal political committee.		Transaction ID : 7216291
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	Earmarked for Duffy for Congress
River Valley Medical Group	Physician	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Tiffany Marie Ludka-Gaulke		Date of Receipt
Mailing Address 504 Oriole Ln		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Wausau	WI	54401-7418
FEC ID number of contributing federal political committee.		Transaction ID : 7216292
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	Earmarked for Duffy for Congress
Marshfield Clinic-Mosinee Center	Physician	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Doctor Rodney Wayne Malinowski		Date of Receipt
Mailing Address 900 Stonefield Cir #913		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Mauston	WI	53948-1681
FEC ID number of contributing federal political committee.		Transaction ID : 7216293
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	Earmarked for Ron Johnson for Senate Inc
Mile Bluff Medical Center	Physician	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 29 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)
A. Daniel Burton Lange MD

Mailing Address 30364 Lange Ln

City State Zip Code
La Crescent MN 55947-4225

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

Name of Employer Occupation
Gundersen Lutheran Medical Center Physician

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2015
Transaction ID : 7216294

Amount of Each Receipt this Period
100.00

Earmarked for Duffy for Congress

Full Name (Last, First, Middle Initial)
B. Doctor William Edward Raduege

Mailing Address PO Box 553

City State Zip Code
Woodruff WI 54568-0553

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

Name of Employer Occupation
W. E. Raduege MD SC Physician

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 13 / 2015
Transaction ID : 7216299

Amount of Each Receipt this Period
100.00

Earmarked for Ron Johnson for Senate

Full Name (Last, First, Middle Initial)
C. Doctor Rodney Wayne Malinowski

Mailing Address 900 Stonefield Cir #913

City State Zip Code
Mauston WI 53948-1681

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

Name of Employer Occupation
Mile Bluff Medical Center Physician

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2015
Transaction ID : 7216500

Amount of Each Receipt this Period
50.00

Earmarked for Duffy for Congress

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

A. Doctor Clarence Paul Chou
Full Name (Last, First, Middle Initial)
Mailing Address 10028 N Miller Dr 2W

City Mequon	State WI	Zip Code 53092-6186
FEC ID number of contributing federal political committee. C		
Name of Employer Clarence P Chou MD	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Date of Receipt
01 / 15 / 2015
Transaction ID : 7216505

Amount of Each Receipt this Period
100.00

Earmarked for Ribble for Congress

B. James L Knavel MD
Full Name (Last, First, Middle Initial)
Mailing Address 352 Peller Rd

City Lake Geneva	State WI	Zip Code 53147-4543
FEC ID number of contributing federal political committee. C		
Name of Employer Mercy Lakeside Orthopaedics	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Date of Receipt
01 / 15 / 2015
Transaction ID : 7216506

Amount of Each Receipt this Period
50.00

Earmarked for Ribble for Congress

C. Doctor John William Hartman
Full Name (Last, First, Middle Initial)
Mailing Address 1521 Belle Plane Cir

City Green Bay	State WI	Zip Code 54313-3211
FEC ID number of contributing federal political committee. C		
Name of Employer Visonex	Occupation Physician	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Date of Receipt
01 / 15 / 2015
Transaction ID : 7216508

Amount of Each Receipt this Period
100.00

Earmarked for Ribble for Congress

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

A. Doctor Paul A. Wertsch
 Full Name (Last, First, Middle Initial)
 Mailing Address 4221 Venetian Ln
 City Madison State WI Zip Code 53718-6655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wildwood Family Clinic SC Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2015
Transaction ID : 7216509
 Amount of Each Receipt this Period
 100.00
 Earmarked for Ribble for Congress

B. Doctor Daniel D. Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1119 Van Buren St
 City Madison State WI Zip Code 53711-2223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UW Health-West Clinic Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2015
Transaction ID : 7216527
 Amount of Each Receipt this Period
 250.00
 Earmarked for Pocan for Congress

C. Doctor Donn David Dexter
 Full Name (Last, First, Middle Initial)
 Mailing Address 7410 Lakeview Dr
 City Eau Claire State WI Zip Code 54701-8329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mayo Clinic Health System - Luther Cam Occupation Physician
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2015
Transaction ID : 7216529
 Amount of Each Receipt this Period
 250.00
 Earmarked for Pocan for Congress

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 97
	<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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)
A. Doctor Jay A. Gold

Mailing Address 3100 Lake Mendota Dr. #705

City Madison	State WI	Zip Code 53705-1462
-----------------	-------------	------------------------

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

Name of Employer MetaStar Inc	Occupation Physician
----------------------------------	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2015

Transaction ID : 7216530

Amount of Each Receipt this Period

250.00

Earmarked for Pocan for Congress

Full Name (Last, First, Middle Initial)
B. Doctor Angela Christine Janis

Mailing Address 100 Wisconsin Ave Apt 1005

City Madison	State WI	Zip Code 53703-4171
-----------------	-------------	------------------------

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

Name of Employer University Health Services Clinic	Occupation Physician
---	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2015

Transaction ID : 7216532

Amount of Each Receipt this Period

250.00

Earmarked for Pocan for Congress

Full Name (Last, First, Middle Initial)
C. Doctor Martha (Molli) Leigh Rolli

Mailing Address 4322 Rolla Ln

City Madison	State WI	Zip Code 53711-2812
-----------------	-------------	------------------------

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

Name of Employer Mendota Mental Health Inst	Occupation Physician
--	-------------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2015

Transaction ID : 7216533

Amount of Each Receipt this Period

50.00

Earmarked for Pocan for Congress

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 33 OF 97
(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)
Wisconsin Medical Society Political Action Committee

A. Doctor Paul A. Wertsch
Full Name (Last, First, Middle Initial)
Mailing Address 4221 Venetian Ln
City Madison State WI Zip Code 53718-6655
FEC ID number of contributing federal political committee. **C**
Name of Employer Wildwood Family Clinic SC Occupation Physician
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2015
Transaction ID : 7216535
Amount of Each Receipt this Period
50.00
Earmarked for Pocan for Congress

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
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

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
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

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	13970.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242091

Earmarked by William Raduege

Form/Schedule: SB23

Transaction ID: 7242092

Earmarked by Kenneth Pechman

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242141

Earmarked by Steven Lindsey

Form/Schedule: SB23

Transaction ID: 7242142

Earmarked by David Hoffman

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242161

Earmarked by Gerald Clarke

Form/Schedule:

Transaction ID:

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242167

Earmarked by George Lange

Form/Schedule:

Transaction ID:

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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Greg Shove

011

Category/
Type

Candidate Name

Sen. Ron Johnson

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	1	5

Transaction ID : 7242222

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Robert McQueeney

011

Category/
Type

Candidate Name

Sen. Ron Johnson

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	1	5

Transaction ID : 7242238

Amount of Each Disbursement this Period

5	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Milind Shah

011

Category/
Type

Candidate Name

Reid Ribble

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 08

Date of Disbursement

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

Transaction ID : 7242251

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

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

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242222

Earmarked by Greg Shove

Form/Schedule: SB23

Transaction ID: 7242238

Earmarked by David Galbis Reig

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242251

Earmarked by Milind Shah

Form/Schedule:

Transaction ID:

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Greg Shove

011
Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : 7242252

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Stephen Webster

011
Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : 7242253

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Susanne Martens

011
Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : 7242254

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

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

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

0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242252

Earmarked by Greg Shove

Form/Schedule: SB23

Transaction ID: 7242253

Earmarked by Stephen Webster

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242254

Earmarked by Suzanne Martens

Form/Schedule:

Transaction ID:

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Jeff Kalenak

Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 7242255

Amount of Each Disbursement this Period

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Marcel Cesar

Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 7242256

Amount of Each Disbursement this Period

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Sherry Clarke

Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 7242257

Amount of Each Disbursement this Period

[MEMO ITEM]
(Memo Entry)

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242255

Earmarked by Jeff Kalenak

Form/Schedule: SB23

Transaction ID: 7242256

Earmarked by Marcel Cesar

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242257

Earmarked by Sherry Clarke

Form/Schedule:

Transaction ID:

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242258

Earmarked by Jeff Rodzak

Form/Schedule: SB23

Transaction ID: 7242262

Earmarked by Frederick Schmidt

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242264

Earmarked by James Knavel

Form/Schedule:

Transaction ID:

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Clarence Chou

011
Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : 7242266

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Paul Wertsch

011
Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : 7242268

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
John Hartman

011
Category/
Type

Candidate Name
Reid Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2015

Transaction ID : 7242269

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

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

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

0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242266

Earmarked by Clarence Chou

Form/Schedule: SB23

Transaction ID: 7242268

Earmarked by Paul Wertsch

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242269

Earmarked by John Hartman

Form/Schedule:

Transaction ID:

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ribble for Congress

Mailing Address PO Box 7200

City Appleton State WI Zip Code 54912

Purpose of Disbursement
Earmarked by Linda Syth; PAC limited unaffected

011

Candidate Name
Reid Ribble

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	04	/	2015

Transaction ID : 7242271

Amount of Each Disbursement this Period

250.00

Earmarked by Linda Syth; PAC limited unaffected

Full Name (Last, First, Middle Initial)

B. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
William Raduege

011

Candidate Name
Sen. Ron Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2015

Transaction ID : 7242753

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Bruce Kraus

011

Candidate Name
Sen. Ron Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2015

Transaction ID : 7242757

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]
(Memo Entry)

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

250.00

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

--

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242753

Earmarked by William Raduege

Form/Schedule: SB23

Transaction ID: 7242757

Earmarked by Bruce Kraus

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
David Hoffmann

011

Candidate Name

Sen. Ron Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2015

Transaction ID : 7242758

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Ken Pechman

011

Candidate Name

Sen. Ron Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2015

Transaction ID : 7242759

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Robert McDonald

011

Candidate Name

Sen. Ron Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2015

Transaction ID : 7242760

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]
(Memo Entry)

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

0.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242758

Earmarked by David Hoffmann

Form/Schedule: SB23

Transaction ID: 7242759

Earmarked by Ken Pechman

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242760

Earmarked by Robert McDonald

Form/Schedule:

Transaction ID:

**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 checked="" 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)

Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ron Johnson For Senate Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2015

Mailing Address 219 E Washington Ave
Suite 101

Transaction ID : 7242763

City Oshkosh State WI Zip Code 54901

Amount of Each Disbursement this Period

75.00

Purpose of Disbursement
Steven Webster

011
Category/ Type

[MEMO ITEM]
(Memo Entry)

Candidate Name

Sen. Ron Johnson

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Ron Johnson For Senate Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2015

Mailing Address 219 E Washington Ave
Suite 101

Transaction ID : 7242764

City Oshkosh State WI Zip Code 54901

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Stephen Webster

011
Category/ Type

[MEMO ITEM]
(Memo Entry)

Candidate Name

Sen. Ron Johnson

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Republican National Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2015

Mailing Address P.O. Box 96994

Transaction ID : 7242765

City Washington State DC Zip Code 20090

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Earmarked by Dr Sri Vasudaran; PAC limits unaffected

011
Category/ Type

Earmarked by Dr Sri Vasudaran; PAC limits unaffected

Candidate Name

Republican National Committee

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

50.00

--

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7242763

Earmarked by Tiffany Ludka Gaulke

Form/Schedule: SB23

Transaction ID: 7242764

Earmarked by Stephen Webster

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Earmarked by Robert Jaeger; PAC limits unaffected

011

Candidate Name

Sen. Ron Johnson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2015

Transaction ID : 7242772

Amount of Each Disbursement this Period

100.00

Earmarked by Robert Jaeger; PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Kind for Congress

Mailing Address P.O. Box 184

City La Crosse State WI Zip Code 54602-0184

Purpose of Disbursement
Earmarked by Jennifer Kirsch(1,000) and Richard Dart (150); PAC limits unaffected

011

Candidate Name

Ron Kind

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2015

Transaction ID : 7242774

Amount of Each Disbursement this Period

1150.00

Earmarked by Jennifer Kirsch(1,000) and Richard Dart (150); PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by Sandra Osborn; PAC limits unaffected

011

Candidate Name

Mark Pocan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 02

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2015

Transaction ID : 7242776

Amount of Each Disbursement this Period

100.00

Earmarked by Sandra Osborn; PAC limits unaffected

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

1350.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Earmarked for (see memo entries); PAC limits unaffected

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : 7244125

Amount of Each Disbursement this Period

1	8	5	0	0	0
---	---	---	---	---	---

Earmarked for (see memo entries); PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Rick Abrams

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : 7244126

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Yakub Ellias

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : 7244127

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

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

1	8	5	0	0	0
---	---	---	---	---	---

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

1	8	5	0	0	0
---	---	---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244126

Earmarked by Rick Abrams

Form/Schedule: SB23

Transaction ID: 7244127

Earmarked by Yakub Ellias

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244128

Earmarked by Tiffany Ludka Gaulke

Form/Schedule: SB23

Transaction ID: 7244129

Earmarked by Rodney Malinowski

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244130

Earmarked by Arne Lagus

Form/Schedule:

Transaction ID:

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
David Lange

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	5		

Transaction ID : 7244131

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
David Hoffman

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	5		

Transaction ID : 7244132

Amount of Each Disbursement this Period

1	5	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Gerald Clarke

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	5		

Transaction ID : 7244133

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

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

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

0	0	0	.	0	0
---	---	---	---	---	---

0	0	0	.	0	0
---	---	---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244131

Earmarked by David Lange

Form/Schedule: SB23

Transaction ID: 7244132

Earmarked by David Hoffmann

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244133

Earmarked by Gerald Clarke

Form/Schedule:

Transaction ID:

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Larry Gordon

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : 7244134

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Duffy for Congress

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Kevin Flaherty

011

Candidate Name
Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : 7244135

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Earmarked by Rodney Malinowski; PAC limits unaffected

011

Candidate Name
Sen. Ron Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	5

Transaction ID : 7244136

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Earmarked by Rodney Malinowski; PAC limits
unaffected

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

5	0	0	0	0	0	0	0	0	0

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

5	0	0	0	0	0	0	0	0	0

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244134

Earmarked by Larry Gordon

Form/Schedule: SB23

Transaction ID: 7244135

Earmarked by Kevin Flaherty

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by Chris Rasch(100), Tim Barthlow (200), Donn Dexter(100);
~~PAC limits unaffected~~

Candidate Name
Mark Pocan

Office Sought: House
 Senate
 President
State: WI District: 02

Disbursement For: 2015
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : 7244137

Amount of Each Disbursement this Period

400.00

Earmarked by Chris Rasch(100), Tim Barthlow (200), Donn Dexter(100); PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by (see memo entries); PAC limits unaffected

Candidate Name
Tammy Baldwin

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : 7244138

Amount of Each Disbursement this Period

1000.00

Earmarked by (see memo entries); PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Jay Gold

Candidate Name
Tammy Baldwin

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : 7244139

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
(Memo Entry)

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

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

1400.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244139

Earmarked by Jay Gold

Form/Schedule:

Transaction ID:

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244140

Earmarked by Marlene Melzer-Lange

Form/Schedule: SB23

Transaction ID: 7244141

Earmarked for Molli Rolli

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244142

Earmarked for Donn Dexter

Form/Schedule:

Transaction ID:

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244143

Earmarked for Richard Dart

Form/Schedule: SB23

Transaction ID: 7244144

Earmarked for Tim Bartholow

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244145

Earmarked for Marcel Cesar

Form/Schedule:

Transaction ID:

**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 checked="" 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)

Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Paul Wertsch

011

Category/
Type

Candidate Name

Tammy Baldwin

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	0		2	0	1	5		

Transaction ID : 7244146

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Clarence Chou

011

Category/
Type

Candidate Name

Tammy Baldwin

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	0		2	0	1	5		

Transaction ID : 7244148

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Kind for Congress

Mailing Address P.O. Box 184

City La Crosse State WI Zip Code 54602-0184

Purpose of Disbursement
Earmarked by Ann Hoffman(100), Donn Dexter (100), Stephen Webster(50);
~~PAC limits unaffected~~

011

Category/
Type

Candidate Name

Ron Kind

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				3	0		2	0	1	5		

Transaction ID : 7244149

Amount of Each Disbursement this Period

2	5	0	.	0	0
---	---	---	---	---	---

Earmarked by Ann Hoffman(100), Donn Dexter (100),
Stephen Webster(50); PAC limits unaffected

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

2	5	0	.	0	0
---	---	---	---	---	---

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

2	5	0	.	0	0
---	---	---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244146

Earmarked for Paul Wertsch

Form/Schedule: SB23

Transaction ID: 7244148

Clarence Chou

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by Brad Manning; PAC limits unaffected

011

Candidate Name

Tammy Baldwin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2015

Transaction ID : 7244150

Amount of Each Disbursement this Period

100.00

Earmarked by Brad Manning; PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. ACP Services PAC

Mailing Address 25 Massachusetts Avenue NW

City Washington DC State DC Zip Code 20001-7401

Purpose of Disbursement
Earmarked by Noel Deep; PAC limits unaffected

011

Candidate Name

ACP Services PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2015

Transaction ID : 7244151

Amount of Each Disbursement this Period

1000.00

Earmarked by Noel Deep; PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. AMPAC

Mailing Address 25 Massachusetts Avenue

City Washington State DC Zip Code 20001

Purpose of Disbursement
Earmarked by George Lange; PAC limits unaffected

011

Candidate Name

AMPAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2015

Transaction ID : 7244152

Amount of Each Disbursement this Period

1000.00

Earmarked by George Lange; PAC limits unaffected

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

2100.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244154

Paul Wertsch

Form/Schedule: SB23

Transaction ID: 7244155

Jay Gold

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244156

Angela Janis

Form/Schedule: SB23

Transaction ID: 7244157

Earmarked by Dan Bennett

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244158

Earmarked by Molli Rolli

Form/Schedule:

Transaction ID:

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
Don Dexter

011

Candidate Name
Mark Pocan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 02

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2015

Transaction ID : 7244159

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by (see memo entries); PAC limits unaffected

011

Candidate Name
Mark Pocan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 02

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2015

Transaction ID : 7244160

Amount of Each Disbursement this Period

1100.00

Earmarked by (see memo entries); PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Russ for Wisconsin Inc

Mailing Address P.O. Box 620061

City Middleton State WI Zip Code 53562

Purpose of Disbursement
Earmarked by Sandra Osborn; PAC limits unaffected

011

Candidate Name
Russ Feingold

Category/
Type

Office Sought: House
 Senate
 President
State: WI District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2015

Transaction ID : 7244161

Amount of Each Disbursement this Period

75.00

Earmarked by Sandra Osborn; PAC limits unaffected

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

1175.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7244159

Earmarked by Donn Dexter

Form/Schedule:

Transaction ID:

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
Earmarked by Jerry Halverson(250), Cyril Hetsko(100), & Gregg Bogost (100); PAC limits unaffected

Candidate Name
Mark Pocan

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼
State: WI District: 02

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2015

Transaction ID : 7244162

Amount of Each Disbursement this Period

450.00

Earmarked by Jerry Halverson(250), Cyril Hetsko(100), & Gregg Bogost (100); PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement
Earmarked by Sri Vasudaran; PAC limits unaffected

Candidate Name
Sen. Ron Johnson

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼
State: WI District:

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2015

Transaction ID : 7244163

Amount of Each Disbursement this Period

125.00

Earmarked by Sri Vasudaran; PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Russ for Wisconsin Inc

Mailing Address P.O. Box 620061

City Middleton State WI Zip Code 53562

Purpose of Disbursement
Earmarked by Jay Gold; PAC limits unaffected

Candidate Name
Russ Feingold

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼
State: WI District:

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2015

Transaction ID : 7244164

Amount of Each Disbursement this Period

50.00

Earmarked by Jay Gold; PAC limits unaffected

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

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

625.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7246131

Earmarked by Rick Abrams

Form/Schedule:

Transaction ID:

**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 checked="" 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)
Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
Richard Roberts

011

Candidate Name
Mark Pocan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 02

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	5

Transaction ID : 7246135

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

B. Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
Susan Turney

011

Candidate Name
Mark Pocan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 02

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	5

Transaction ID : 7246138

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

Full Name (Last, First, Middle Initial)

C. Pocan for Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
Richard Dart

011

Candidate Name
Mark Pocan

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 02

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	5

Transaction ID : 7246139

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

[MEMO ITEM]
(Memo Entry)

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

0	0	0	0	.	0	0
---	---	---	---	---	---	---

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

1	3	9	7	0	0	0
---	---	---	---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7246135

Earmarked by Richard Roberts

Form/Schedule: SB23

Transaction ID: 7246138

Earmarked by Susan Turney

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : 7246139

Earmarked by Richard Dart

Form/Schedule:

Transaction ID: