

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

2005 JUL 11 A 9:57
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

NORTH SHORE SAVINGS AND LOAN ASSOCIATION PAC

ADDRESS (number and street)

15700 WEST BLUEMOUND ROAD

Check if different than previously reported. (ACC)

BROOKFIELD

WI

53001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00205138

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

XX

(d) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

XX

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

2005

through

MM / DD / YYYY

MM / DD / YYYY

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jay McKenna

Signature of Treasurer

J. McKenna

Date

MM / DD / YYYY

MM / DD / YYYY

2005

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

250308M3394

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

North Shore Savings and Loan Association PAC

Report Covering the Period: From: 01 ' 01 ' 2005 To: 06 ' 30 ' 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2005</u>		1389.83
(b) Cash on Hand at Beginning of Reporting Period.....	1389.83	
(c) Total Receipts (from Line 19).....	1100.00	1100.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2489.83	2489.83
7. Total Disbursements (from Line 31).....	1500.00	1500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	989.83	989.83
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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

25038833395

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

North Shore Savings and Loan Association PAC

Report Covering the Period:

From:

01 ' *01* ' *2005*

To:

06 ' *30* ' *2005*

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).....

1100.00

1100.00

(ii) Unitemized

0

0

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1100.00

1100.00

(b) Political Party Committees

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)

1100.00

1100.00

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1100.00

1100.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1100.00

1100.00

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share		0	0
(ii) Non-Federal Share		0	0
(b) Other Federal Operating Expenditures		0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		0	0
22. Transfers to Affiliated/Other Party Committees		0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees		1,500.00	1,500.00
24. Independent Expenditures (use Schedule E)		0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		0	0
26. Loan Repayments Made		0	0
27. Loans Made		0	0
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0	0
(b) Political Party Committees		0	0
(c) Other Political Committees (such as PACs)		0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0	0
29. Other Disbursements		0	0
30. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share		0	0
(ii) "Levin" Share		0	0
(b) Federal Election Activity Paid Entirely With Federal Funds		0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..		1,500.00	1,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		1,500.00	1,500.00

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DETAILED SUMMARY PAGE
of Disbursements

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

1100.00
0
1100.00
0
0
0

1100.00
0
1100.00
0
0
0

2503883398

**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)

<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

PAGE / OF 2

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)
North Shore Savings and Loan Association PAC

A. Full Name (Last, First, Middle Initial)
Brophy, Richard M.

Mailing Address
13100 Wrayburn Road

City **E/m Grove** State **WI** Zip Code **53122**

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

Name of Employer **North Shore Bank, FSB** Occupation **EVP & COO**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **300.00**

Date of Receipt
03 / 08 / 2005

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
McKenna, Jay F.

Mailing Address
2620 Bartlett Dr. Brookfield, WI

City **Brookfield** State **WI** Zip Code **53045**

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

Name of Employer **North Shore Bank, FSB** Occupation **SVP & CFO**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **300.00**

Date of Receipt
03 / 08 / 2005

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Potter, David J.

Mailing Address
W 165 Miosog Wagon Trail

City **Getmantown** State **WI** Zip Code **53022**

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

Name of Employer **North Shore Bank, FSB** Occupation **SVP**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **250.00**

Date of Receipt
03 / 08 / 2005

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) **850.00**

TOTAL This Period (last page this line number only)

250383399

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE <u>2</u> OF <u>2</u>				
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
North Shore Savings and Loan Association PAK

A. Full Name (Last, First, Middle Initial)
Wollach, Andrew S.

Mailing Address
10500 N. Wood Crest Drive

City Mequon, WI State WI Zip Code 53092

FEC ID number of contributing federal political committee. C

Name of Employer North Shore Bank, FSB Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 2,500.00

Date of Receipt
03 / 08 / 2005

Amount of Each Receipt this Period
250.00

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶ 250.00

TOTAL This Period (last page this line number only).....▶ 1,000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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NAME OF COMMITTEE (In Full)
North Shore Savings and Loan Association PAC

A. ACB Compac
 Mailing Address 900 19th Street NW #400
 City Washington D.C. State _____ Zip Code 20006
 Purpose of Disbursement contribution to Federal committee
 Candidate Name _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____

Date of Disbursement: 02 / 21 / 2005
 Amount of Each Disbursement this Period: 1,000.00
 Category/Type: Q1

B. ACB Compac
 Mailing Address 900 19th Street NW #400
 City Washington D.C. State _____ Zip Code 20006
 Purpose of Disbursement contribution to Federal committee
 Candidate Name _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____

Date of Disbursement: 04 / 08 / 2005
 Amount of Each Disbursement this Period: 500.00
 Category/Type: Q1

C. _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Purpose of Disbursement _____
 Candidate Name _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____

Date of Disbursement: _____ / _____ / _____
 Amount of Each Disbursement this Period: _____
 Category/Type: _____

SUBTOTAL of Disbursements This Page (optional) 1,500.00
 TOTAL This Period (last page this line number only) 1,500.00

25038833401

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7-5-05
<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JMP
 PREPARER
 (3/2005)

7-11-05
 DATE PREPARED

25038833402