

**FEC FORM 3X**

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

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

STANDING FOR WISCONSIN FAMILIES INC

ADDRESS (number and street) PO BOX 7486

Check if different than previously reported. (ACC) MADISON WI 53707

2. **FEC IDENTIFICATION NUMBER** ▼ C 00528893 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲

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 M M / D D / Y Y Y Y Y Y in the State of  

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

General (30G)  Runoff (30R)  Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 01 / 2018 through M M / D D / Y Y Y Y Y Y 11 / 26 / 2018

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 Leslie Harrison

Signature of Treasurer *Leslie Harrison* Date M M / D D / Y Y Y Y Y Y 12 / 21 / 2018

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name  
STANDING FOR WISCONSIN FAMILIES INC

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="YYYY 2018"/>		<input type="text" value="280.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="280.00"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="25.00"/>	<input type="text" value="25.00"/>
(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="305.00"/>	<input type="text" value="305.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5.00"/>	<input type="text" value="5.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="300.00"/>	<input type="text" value="300.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	

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

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Page 3

Write or Type Committee Name  
STANDING FOR WISCONSIN FAMILIES INC

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).....

0

0.00

(ii) Unitemized .....

25.00

25.00

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

25.00

25.00

(b) Political Party Committees .....

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

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

25.00

25.00

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

13. All Loans Received.....

14. Loan Repayments Received.....

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

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

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

18. Transfers from Non-Federal and Levin Funds

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

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

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

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

25.00

25.00

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

25.00

25.00





IS FIRMLY TO SEAL

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PRIORITY MAIL  
POSTAGE REQUIRED

# PRIORITY<sup>®</sup> MAIL<sup>★</sup>

DATE OF DELIVERY SPECIFIED \*

USPS TRACKING<sup>™</sup> INCLUDED \*

INSURANCE INCLUDED \*

PICKUP AVAILABLE

\* Domestic only

EN USED INTERNATIONALLY,  
CUSTOMS DECLARATION  
ABEL MAY BE REQUIRED.

FROM

# P

US POSTAGE & FEES PAID  
PRIORITY MAIL  
FR Env  
Comp/SP/Price  
06230009640882  
FROM 53703  
12/21/2018  
stamp.com

## PRIORITY MAIL 2-DAY<sup>™</sup>

0006

Standing For Wisconsin Families  
PO Box 7486  
Madison WI 53707

C000

SHIP TO: Federal Election Commission  
999 E Street, NW  
Washington DC 20463-0001



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