

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 2920 Marketplace Drive, Suite 103
Check if different than previously reported. (ACC) Fitchburg WI 53719

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00548438 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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

Signature of Treasurer *Green, Heidi, , Ms.,* [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2022"/>	<input type="text" value="0.00"/>	<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="5200.00"/>	<input type="text" value="8100.00"/>
(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="5200.00"/>	<input type="text" value="8100.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5200.00"/>	<input type="text" value="8100.00"/>
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

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).....	5200.00	8100.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5200.00	8100.00
(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)	5200.00	8100.00
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)).....▶	5200.00	8100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5200.00	8100.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	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.....	5200.00	8100.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5200.00	8100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5200.00	8100.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5200.00	8100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5200.00	8100.00
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: (check only one)	PAGE 6 OF 13
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Ringle, Elizabeth, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3557 Lucia Crest
 City Madison State WI Zip Code 53705-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wisconsin Medical Society Occupation (for Individual) Executive Director
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2022
Transaction ID : 11425346
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Earmark for Mandela Barnes for Wisconsin

B. Bennett, Daniel, D., Doctor,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) UW Health-West Clinic Occupation (for Individual) Physician
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2022
Transaction ID : 11425350
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 Earmark for Mandela Barnes for Wisconsin

C. Merkitch, Kenneth, William, Doctor,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W5732 Heatherwood Place
 City La Crosse State WI Zip Code 54601-2476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gundersen La Crosse Clinic Occupation (for Individual) Physician
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2022
Transaction ID : 11425353
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Earmark for Mandela Barnes for Wisconsin

SUBTOTAL of Receipts This Page (optional).....	2750.00
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 13
	<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. Molaska, Wendy, Lynn, Doctor,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3034 Bosshard Drive

City Fitchburg	State WI	Zip Code 53711-5858
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Dedicated Family Care	Occupation (for Individual) Physician
--	--

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2022

Transaction ID : 11425356

Amount of Each Receipt this Period
250.00

Memo Item

Earmark for Mandela Barnes for Wisconsin

B. Dart, Richard, A., Doctor,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W3338 State Rd 35
PO Box 63

City Maiden Rock	State WI	Zip Code 54750-8627
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Physician
--	--

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2022

Transaction ID : 11425359

Amount of Each Receipt this Period
100.00

Memo Item

Earmark for Mandela Barnes for Wisconsin

c. Longley, B. Jack, , Doctor, Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 N Prospect Ave

City Madison	State WI	Zip Code 53726-3936
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UW Health-West Clinic	Occupation (for Individual) Physician
--	--

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2022

Transaction ID : 11425362

Amount of Each Receipt this Period
500.00

Memo Item

Earmark for Mandela Barnes for Wisconsin

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 8 OF 13
	<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. Campbell, Andrew, C., Doctor,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N30W28977 Lakeside Dr
 City Pewaukee State WI Zip Code 53072-3312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Quintessa Aesthetic Center - Mequon Occupation (for Individual) Physician
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2022
Transaction ID : 11425365
 Amount of Each Receipt this Period 500.00
 Memo Item
 Earmark for Ron Johnson for Senate Inc

B. Dexter, Donn, David, Doctor,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Mayo Clinic Health System - Eau Claire Occupation (for Individual) Physician
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2022
Transaction ID : 11428370
 Amount of Each Receipt this Period 500.00
 Memo Item
 Earmark for Mandela Barnes for Wisconsin

C. Belknap, Mark, Kenyon, Doctor,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 2nd Ave W
 City Ashland State WI Zip Code 54806-3130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2022
Transaction ID : 11428372
 Amount of Each Receipt this Period 500.00
 Memo Item
 Earmark for Mandela Barnes for Wisconsin

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 9 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kwong, Roger, Waynsan, Doctor,

Mailing Address 1015 Cliffwood Ln

City La Crosse State WI Zip Code 54601-6021

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

Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2022

Transaction ID : 11428374

Amount of Each Receipt this Period
 100.00

Memo Item

Earmark for Mandela Barnes for Wisconsin

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	5200.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
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
Earmark by Andrew Campbell; PAC limits unaffected

Category/
Type

Candidate Name
Johnson, Ron, , Sen.,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: WI District:

Date of Disbursement
M M / D D / Y Y Y Y Y
10 / 04 / 2022

FEC Identification Number

Transaction ID : 11425367
Amount of Each Disbursement this Period

Memo Item Earmark by Andrew Campbell; PAC limits unaffected

Full Name (Last, First, Middle Initial)

B. Mandela Barnes For Wisconsin

Mailing Address PO Box 597

City Milwaukee State WI Zip Code 53201

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

Category/
Type

Candidate Name
Barnes, Mandela, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: WI District:

Date of Disbursement
M M / D D / Y Y Y Y Y
10 / 04 / 2022

FEC Identification Number

Transaction ID : 11425373
Amount of Each Disbursement this Period

Memo Item Earmarked by (see memo entries) PAC limits unaffected

Full Name (Last, First, Middle Initial)

C. Mandela Barnes For Wisconsin

Mailing Address PO Box 597

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Earmark by Elizabeth Ringle; PAC limits unaffected

Category/
Type

Candidate Name
Barnes, Mandela, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: WI District:

Date of Disbursement
M M / D D / Y Y Y Y Y
10 / 04 / 2022

FEC Identification Number

Transaction ID : 11425374
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)..... ▶

**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"/> 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

A. Mandela Barnes For Wisconsin

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 597

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Earmark by Daniel Bennett;PAC limits unaffected

Candidate Name
Barnes, Mandela, , ,

Office Sought: House Senate President
State: WI District:

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 04 / 2022

FEC Identification Number: C00784959
Transaction ID : 11425375
Amount of Each Disbursement this Period: 2000.00
(Memo Entry)
 Memo Item

B. Mandela Barnes For Wisconsin

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 597

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Earmark by Kenneth Merkitch;PAC limits unaffected

Candidate Name
Barnes, Mandela, , ,

Office Sought: House Senate President
State: WI District:

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 04 / 2022

FEC Identification Number: C00784959
Transaction ID : 11425376
Amount of Each Disbursement this Period: 250.00
(Memo Entry)
 Memo Item

C. Mandela Barnes For Wisconsin

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 597

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Earmark by Wendy Molaska;PAC limits unaffected

Candidate Name
Barnes, Mandela, , ,

Office Sought: House Senate President
State: WI District:

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 04 / 2022

FEC Identification Number: C00784959
Transaction ID : 11425377
Amount of Each Disbursement this Period: 250.00
(Memo Entry)
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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) <table style="font-size: small; margin-top: 5px;"> <tr> <td><input type="checkbox"/> 21b</td> <td><input type="checkbox"/> 22</td> <td><input checked="" type="checkbox"/> 23</td> <td><input type="checkbox"/> 26</td> <td><input type="checkbox"/> 27</td> </tr> <tr> <td><input type="checkbox"/> 28a</td> <td><input type="checkbox"/> 28b</td> <td><input type="checkbox"/> 28c</td> <td><input type="checkbox"/> 29</td> <td><input type="checkbox"/> 30b</td> </tr> </table>	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	PAGE 12 OF 13
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27								
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b								

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

Full Name (Last, First, Middle Initial) A. Mandela Barnes For Wisconsin			Date of Disbursement <table border="1" style="font-size: x-small; width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>04</td><td></td><td></td><td>2022</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			04			2022			
M	M	/	D	D	/	Y	Y	Y	Y														
10			04			2022																	
Mailing Address PO Box 597			FEC Identification Number <table border="1" style="font-size: x-small; width:100%; text-align: center;"> <tr> <td>C</td><td>C00784959</td> </tr> <tr> <td colspan="2">Transaction ID : 11425378</td> </tr> <tr> <td colspan="2">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="2" style="text-align: right;">100.00</td> </tr> <tr> <td colspan="2" style="text-align: center;">(Memo Entry)</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/> Memo Item</td> </tr> </table>	C	C00784959	Transaction ID : 11425378		Amount of Each Disbursement this Period		100.00		(Memo Entry)		<input checked="" type="checkbox"/> Memo Item									
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City Milwaukee	State WI	Zip Code 53201																					
Purpose of Disbursement Earmark by Richard Dart;PAC limits unaffected		<table border="1" style="font-size: x-small;"> <tr> <td>011</td> </tr> </table> Category/ Type	011																				
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Candidate Name Barnes, Mandela, , ,	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		State: WI District:																					

Full Name (Last, First, Middle Initial) B. Mandela Barnes For Wisconsin			Date of Disbursement <table border="1" style="font-size: x-small; width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>04</td><td></td><td></td><td>2022</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			04			2022			
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Mailing Address PO Box 597			FEC Identification Number <table border="1" style="font-size: x-small; width:100%; text-align: center;"> <tr> <td>C</td><td>C00784959</td> </tr> <tr> <td colspan="2">Transaction ID : 11425379</td> </tr> <tr> <td colspan="2">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="2" style="text-align: right;">500.00</td> </tr> <tr> <td colspan="2" style="text-align: center;">(Memo Entry)</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/> Memo Item</td> </tr> </table>	C	C00784959	Transaction ID : 11425379		Amount of Each Disbursement this Period		500.00		(Memo Entry)		<input checked="" type="checkbox"/> Memo Item									
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(Memo Entry)																							
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City Milwaukee	State WI	Zip Code 53201																					
Purpose of Disbursement Earmark by Jack B. Longley Jr.;PAC limits unaffected		<table border="1" style="font-size: x-small;"> <tr> <td>011</td> </tr> </table> Category/ Type	011																				
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Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		State: WI District:																					

Full Name (Last, First, Middle Initial) C. Mandela Barnes For Wisconsin			Date of Disbursement <table border="1" style="font-size: x-small; width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>18</td><td></td><td></td><td>2022</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			18			2022			
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10			18			2022																	
Mailing Address PO Box 597			FEC Identification Number <table border="1" style="font-size: x-small; width:100%; text-align: center;"> <tr> <td>C</td><td>C00784959</td> </tr> <tr> <td colspan="2">Transaction ID : 11428376</td> </tr> <tr> <td colspan="2">Amount of Each Disbursement this Period</td> </tr> <tr> <td colspan="2" style="text-align: right;">1100.00</td> </tr> <tr> <td colspan="2" style="text-align: center;">Earmark by (see memo entries); PAC limits unaffected</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Memo Item</td> </tr> </table>	C	C00784959	Transaction ID : 11428376		Amount of Each Disbursement this Period		1100.00		Earmark by (see memo entries); PAC limits unaffected		<input type="checkbox"/> Memo Item									
C	C00784959																						
Transaction ID : 11428376																							
Amount of Each Disbursement this Period																							
1100.00																							
Earmark by (see memo entries); PAC limits unaffected																							
<input type="checkbox"/> Memo Item																							
City Milwaukee	State WI	Zip Code 53201																					
Purpose of Disbursement Earmark by (see memo entries); PAC limits unaffected		<table border="1" style="font-size: x-small;"> <tr> <td>011</td> </tr> </table> Category/ Type	011																				
011																							
Candidate Name Barnes, Mandela, , ,		Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		State: WI District:																					

SUBTOTAL of Disbursements This Page (optional).....▶	<table border="1" style="font-size: x-small; width:100%; text-align: center;"> <tr> <td>1100.00</td> </tr> </table>	1100.00
1100.00		
TOTAL This Period (last page this line number only).....▶	<table border="1" style="font-size: x-small; width:100%; text-align: center;"> <tr> <td style="height: 20px;"></td> </tr> </table>	

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"/> 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

A. Mandela Barnes For Wisconsin

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 597

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Earmark by Donn Dexter; PAC limits unaffected

Candidate Name
Barnes, Mandela, , ,

Office Sought: House Senate President
State: WI District:

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 18 / 2022

FEC Identification Number: C00784959
Transaction ID : 11428377
Amount of Each Disbursement this Period: 500.00
(Memo Entry)
 Memo Item

B. Mandela Barnes For Wisconsin

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 597

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Earmark by Mark Belnap; PAC limits unaffected

Candidate Name
Barnes, Mandela, , ,

Office Sought: House Senate President
State: WI District:

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 18 / 2022

FEC Identification Number: C00784959
Transaction ID : 11428378
Amount of Each Disbursement this Period: 500.00
(Memo Entry)
 Memo Item

C. Mandela Barnes For Wisconsin

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 597

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement
Earmark by Roger Kwong; PAC limits unaffected

Candidate Name
Barnes, Mandela, , ,

Office Sought: House Senate President
State: WI District:

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 18 / 2022

FEC Identification Number: C00784959
Transaction ID : 11428379
Amount of Each Disbursement this Period: 100.00
(Memo Entry)
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	5200.00