

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

FRIENDS OF PETER THERON

ADDRESS (number and street)

1021 SEQUOIA TRAIL



Check if different than previously reported. (ACC)

MADISON

WI

53713

2. FEC IDENTIFICATION NUMBER ▼

C C00450353

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

WI

02

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)



Termination Report (TER)

(b) 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

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

01

2014

through

M M / D D / Y Y Y Y

06

30

2014

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 CHRISTINE BROOKS

Signature of Treasurer CHRISTINE BROOKS

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

14

2014

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 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 13

Write or Type Committee Name

FRIENDS OF PETER THERON

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6143.00	8998.87
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6143.00	8998.87
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5754.66	7944.34
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	5754.66	7944.34
8. Cash on Hand at Close of Reporting Period (from Line 27)	3292.48	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

FRIENDS OF PETER THERON

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

500.00

4013.09

(ii) Unitemized.....

2143.00

4810.78

(iii) TOTAL of contributions from individuals ▶

2643.00

8823.87

(b) Political Party Committees.....

0.00

175.00

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

3500.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

6143.00

8998.87

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

6143.00

8998.87

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 13

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5754.66	7944.34
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	1500.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	1500.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5754.66	9444.34

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2904.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6143.00
25. SUBTOTAL (add Line 23 and Line 24).....	9047.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5754.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3292.48

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

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

FOR LINE NUMBER:

PAGE 5 OF 13

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF PETER THERON

Full Name (Last, First, Middle Initial)

SHARON JOHNSON

A.

Mailing Address PO BOX 65

City

AVOCA

State

WI

Zip Code

53506

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		16		2014

Transaction ID : SA11AI.4866

Amount of Each Receipt this Period

500.00

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)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	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)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 13

☐ 11a 12	☐ 11b 13a	☒ 11c 13b	☐ 11d 14	☐ 15
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NAME OF COMMITTEE (In Full)

FRIENDS OF PETER THERON

Full Name (Last, First, Middle Initial)

REPUBLICAN PARTY SECOND CONGRESSIONAL DISTRICT

A.

Mailing Address 1 W SPYGLASS CT

City

MADISON

State

WI

Zip Code

53717

FEC ID number of contributing
federal political committee.

C

C00164236

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11C.4878

Amount of Each Receipt this Period

3500.00

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)

Election Cycle-to-Date

Date of Receipt

M M / D D / 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)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

3500.00

3500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF PETER THERON

Full Name (Last, First, Middle Initial)

A. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

Amount of Each Disbursement this Period

149.00

Transaction ID : SB17.4699

B. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2014

Amount of Each Disbursement this Period

208.50

Transaction ID : SB17.4704

C. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2014

Amount of Each Disbursement this Period

208.50

Transaction ID : SB17.4707

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

566.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF PETER THERON

Full Name (Last, First, Middle Initial)

A. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

Amount of Each Disbursement this Period

208.50

Transaction ID : SB17.4711

B. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2014

Amount of Each Disbursement this Period

208.50

Transaction ID : SB17.4715

C. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

Amount of Each Disbursement this Period

208.50

Transaction ID : SB17.4716

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

625.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF PETER THERON

Full Name (Last, First, Middle Initial)

A. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 19 / 2014

Amount of Each Disbursement this Period

208.50

Transaction ID : SB17.4718

B. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 27 / 2014

Amount of Each Disbursement this Period

208.50

Transaction ID : SB17.4722

C. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary	☐ General
☐ Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 02 / 2014

Amount of Each Disbursement this Period

331.50

Transaction ID : SB17.4729

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

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

748.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF PETER THERON

Full Name (Last, First, Middle Initial)

A. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

361.50

Transaction ID : SB17.4733

B. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

55.50

Transaction ID : SB17.4737

C. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

Amount of Each Disbursement this Period

331.50

Transaction ID : SB17.4742

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

748.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF PETER THERON

Full Name (Last, First, Middle Initial)

A. CLEAR CHANNEL

Mailing Address PO BOX 99

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
AD

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

Amount of Each Disbursement this Period

495.80

Transaction ID : SB17.4749

B. PARK BANK

Mailing Address 2910 CROSSROADS DR

City	State	Zip Code
MADISON	WI	53718

Purpose of Disbursement
SERVICE CHARGES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

Amount of Each Disbursement this Period

18.00

Transaction ID : SB17.4724

C. PARK BANK

Mailing Address 2910 CROSSROADS DR

City	State	Zip Code
MADISON	WI	53718

Purpose of Disbursement
SERVICE CHARGES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.4748

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

516.80

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF PETER THERON

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY SECOND CONGRESSIONAL DISTRICT

Mailing Address 1 W SPYGLASS CT

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
MADISON	WI	53717

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CD LIST

001

Transaction ID : SB17.4719

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. WCLO

Mailing Address PO BOX 5001

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

City	State	Zip Code
JANESVILLE	WI	53547

Amount of Each Disbursement this Period

290.00

Purpose of Disbursement
AD

004

Transaction ID : SB17.4725

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. WCLO

Mailing Address PO BOX 5001

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

City	State	Zip Code
JANESVILLE	WI	53547

Amount of Each Disbursement this Period

395.50

Purpose of Disbursement
AD

004

Transaction ID : SB17.4747

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

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

1185.50

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

5310.80