

**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

TOFT FOR CONGRESS

ADDRESS (number and street)

PO BOX 68

Check if different  
than previously  
reported. (ACC)

OSSEO

WI

53758

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00658807

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

WI

03

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

through

M M /

D D /

Y Y Y Y

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

LIND, KATE, , ,

Type or Print Name of Treasurer

Signature of Treasurer

LIND, KATE, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 69

Write or Type Committee Name  
TOFT FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2018

To:

M M / D D / Y Y Y Y  
06 / 30 / 2018

|  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....  | 62724.31                | 181008.02                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....  | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 62724.31                | 181008.02                          |
| 7. Net Operating Expenditures  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....   | 58369.42                | 103500.86                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 58369.42                | 103500.86                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....   | 107507.16               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 30000.00                |                                    |

## 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

PAGE 3 / 69

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

TOFT FOR CONGRESS

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 1 |   | 2 | 0 | 1 | 8 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 1 | 8 |

**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).....

44864.60

150176.75

(ii) Unitemized.....

8438.93

19264.93

(iii) TOTAL of contributions from individuals ▶

53303.53

169441.68

(b) Political Party Committees.....

0.00

0.00

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

9000.00

9000.00

(d) The Candidate.....

420.78

2566.34

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

62724.31

181008.02

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

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

0.00

30000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

30000.00

## 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)..... ▶

62724.31

211008.02

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 69

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 58369.42                      | 103500.86                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 58369.42                      | 103500.86                          |

## **III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 103152.27 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 62724.31  |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 165876.58 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 58369.42  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 107507.16 |

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

PAGE 5 OF 69

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANDERSON, JAMES, E., ,**  
Mailing Address 305 MAPLE BLUFF RD N

|                       |             |                   |
|-----------------------|-------------|-------------------|
| City<br>STEVENS POINT | State<br>WI | Zip Code<br>54482 |
|-----------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELLIS STONEOccupation  
PRESIDENT

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 06 / 29 / 2018          |

Transaction ID : SA11AI.6075

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BARR, DANIEL, R., ,**  
Mailing Address S3576 SUGAR MAPLE LANE

|                       |             |                   |
|-----------------------|-------------|-------------------|
| City<br>FOUNTAIN CITY | State<br>WI | Zip Code<br>54629 |
|-----------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

594.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 05 / 16 / 2018          |

Transaction ID : SA11AI.6023

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BERG, LAURENCE, , ,**  
Mailing Address 151 FAIRWAY COURT

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>ONALASKA | State<br>WI | Zip Code<br>54650 |
|------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUNDERSEN HEALTH SYSTEMOccupation  
PHYSICIAN

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 04 / 27 / 2018          |

Transaction ID : SA11AI.6113

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ►

550.00

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

# **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)

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

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BERG, LAURENCE, , ,**  
Mailing Address 151 FAIRWAY COURT

City  
ONALASKA

State  
WI

Zip Code  
54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUNDERSEN HEALTH SYSTEM

Occupation  
PHYSICIAN

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 21 2018

Transaction ID : SA11AI.6114

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BERG, LAURENCE, , ,**  
Mailing Address 151 FAIRWAY COURT

City  
ONALASKA

State  
WI

Zip Code  
54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUNDERSEN HEALTH SYSTEM

Occupation  
PHYSICIAN

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 03 2018

Transaction ID : SA11AI.6115

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BERG, LAURENCE, , ,**  
Mailing Address 151 FAIRWAY COURT

City  
ONALASKA

State  
WI

Zip Code  
54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUNDERSEN HEALTH SYSTEM

Occupation  
PHYSICIAN

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 15 2018

Transaction ID : SA11AI.6116

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

300.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BERG, LAURENCE, , ,**  
Mailing Address 151 FAIRWAY COURT

City State Zip Code  
ONALASKA WI 54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUNDERSEN HEALTH SYSTEM

Occupation  
PHYSICIAN

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6117

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BERG, TROY, L., ,**  
Mailing Address 3720 GLEN CREST COURT

City State Zip Code  
EAU CLAIRE WI 54701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CVOSM

Occupation  
PHYSICIAN

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6194

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRANDAU, ANN, I., ,**  
Mailing Address 4003 MARY DRIVE

City State Zip Code  
ONALASKA WI 54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRANDAU & WALTZ

Occupation  
ATTORNEY

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 16 2018

Transaction ID : SA11AI.6001

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

800.00

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

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

FOR LINE NUMBER: PAGE 8 OF 69  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

|  |             |   |  |  |  |
|--|-------------|---|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>BRYANT, ANTHONY, W, ,</b>    |             |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 21 / 2018 |  |  |
| Mailing Address 108 N BARSTOW STREET   |             |   | <b>Transaction ID : SA11AI.6004</b>                          |  |  |
| City<br>WAUKESHA   | State<br>WI | Zip Code<br>53186   | Amount of Each Receipt this Period<br>250.00                 |  |  |
| FEC ID number of contributing federal political committee.<br>C                      |             | Name of Employer<br>CENTURY FENCE   |  |  |  |
| Occupation<br>EXECUTIVE  |             | Receipt For: 2018<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |
| Election Cycle-to-Date ▼<br>350.00   |             | <input type="checkbox"/> Memo Item<br>CONTRIBUTION  |  |  |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>CAMPBELL, ROBERT, ROY, ,</b> |             |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 16 / 2018 |  |  |
| Mailing Address 1934 NAKOMIS AVENUE  |             |   | <b>Transaction ID : SA11AI.6169</b>                          |  |  |
| City<br>LA CROSSE  | State<br>WI | Zip Code<br>54603   | Amount of Each Receipt this Period<br>500.00                 |  |  |
| FEC ID number of contributing federal political committee.<br>C                      |             | Name of Employer<br>HAB, INC  |  |  |  |
| Occupation<br>VP OF FINANCE  |             | Receipt For: 2018<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |
| Election Cycle-to-Date ▼<br>800.00   |             | <input type="checkbox"/> Memo Item<br>CONTRIBUTION  |  |  |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>CAMPBELL, ROBERT, ROY, ,</b> |             |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 23 / 2018 |  |  |
| Mailing Address 1934 NAKOMIS AVENUE  |             |   | <b>Transaction ID : SA11AI.6171</b>                          |  |  |
| City<br>LA CROSSE  | State<br>WI | Zip Code<br>54603   | Amount of Each Receipt this Period<br>500.00                 |  |  |
| FEC ID number of contributing federal political committee.<br>C                      |             | Name of Employer<br>HAB, INC  |  |  |  |
| Occupation<br>VP OF FINANCE  |             | Receipt For: 2018<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |  |
| Election Cycle-to-Date ▼<br>1300.00  |             | <input type="checkbox"/> Memo Item<br>CONTRIBUTION  |  |  |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                              |             |   | 1250.00  |  |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                    |             |   |  |  |  |

# **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)

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

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTY, JOHN, H, ,**

Mailing Address 4400 DALLAS AVENUE

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>SPARTA | State<br>WI | Zip Code<br>54656 |
|----------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6094

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CLEARY, GAIL, K, ,**

Mailing Address W4747 CEDAR ROAD

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>LA CROSSE | State<br>WI | Zip Code<br>54601 |
|-------------------|-------------|-------------------|

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

|  |                         |
|--|-------------------------|
| Name of Employer<br>CLEARY MANAGEMENT CORP | Occupation<br>EXECUTIVE |
|--|-------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 21 2018

Transaction ID : SA11AI.6061

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CLEARY, GAIL, K, ,**

Mailing Address W4747 CEDAR ROAD

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>LA CROSSE | State<br>WI | Zip Code<br>54601 |
|-------------------|-------------|-------------------|

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

|  |                         |
|--|-------------------------|
| Name of Employer<br>CLEARY MANAGEMENT CORP | Occupation<br>EXECUTIVE |
|--|-------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 21 2018

Transaction ID : SA11AI.6062

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

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

430.00

# **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)

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

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CONNELLY, MARK, V., M.D.**  
Mailing Address W5419 PINE BLUFF ROAD

City State Zip Code  
LACROSSE WI 54601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUNDERSEN LUTHERAN

Occupation  
PHYSICIAN

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 13 2018

Transaction ID : SA11AI.6125

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CONNELLY, MARK, V., M.D.**  
Mailing Address W5419 PINE BLUFF ROAD

City State Zip Code  
LACROSSE WI 54601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUNDERSEN LUTHERAN

Occupation  
PHYSICIAN

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6128

Amount of Each Receipt this Period

225.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CONNELLY, MARK, V., M.D.**  
Mailing Address W5419 PINE BLUFF ROAD

City State Zip Code  
LACROSSE WI 54601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GUNDERSEN LUTHERAN

Occupation  
PHYSICIAN

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6129

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

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

500.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
TOFT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
DAHL, EVA, C., , D.D.S.

Mailing Address 800 COUNTRY CLUB LANE

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>ONALASKA | State<br>WI | Zip Code<br>54650 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|  |                       |
|--|-----------------------|
| Name of Employer<br>ENDODONTIC SPECIALISTS | Occupation<br>DENTIST |
|--|-----------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6057

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DAHL, HARRY, , ,

Mailing Address 711 3RD STREET SO

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>LACROSSE | State<br>WI | Zip Code<br>54601 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                     |                        |
|-------------------------------------|------------------------|
| Name of Employer<br>DAHL AUTOMOTIVE | Occupation<br>CHAIRMAN |
|-------------------------------------|------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 14 2018

Transaction ID : SA11AI.6068

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DAHL, HARRY, , ,

Mailing Address 711 3RD STREET SO

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>LACROSSE | State<br>WI | Zip Code<br>54601 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                     |                        |
|-------------------------------------|------------------------|
| Name of Employer<br>DAHL AUTOMOTIVE | Occupation<br>CHAIRMAN |
|-------------------------------------|------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2018

Transaction ID : SA11AI.6069

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

1000.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DANNEKER, JOHN, , ,**

Mailing Address P.O. BOX 38

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>MAIDEN ROCK | State<br>WI | Zip Code<br>54750 |
|---------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 05 2018

Transaction ID : SA11AI.6090

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DILLMAN, BLAIR, , ,**

Mailing Address 32965 COUNTY ROAD K

|                          |             |                   |
|--------------------------|-------------|-------------------|
| City<br>PRAIRIE DU CHIEN | State<br>WI | Zip Code<br>53820 |
|--------------------------|-------------|-------------------|

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

|                                       |                              |
|---------------------------------------|------------------------------|
| Name of Employer<br>DILLMAN EQUIPMENT | Occupation<br>BUSINESS OWNER |
|---------------------------------------|------------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6009

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FARRELL, THOMAS, F., ,**

Mailing Address 323 S BEAUMONT ROAD

|                          |             |                   |
|--------------------------|-------------|-------------------|
| City<br>PRAIRIE DU CHIEN | State<br>WI | Zip Code<br>53821 |
|--------------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6192

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

1550.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FEEHAN, WILLIAM, J, ,**

Mailing Address 1901 CHEROKEE AVENUE

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>LA CROSSE | State<br>WI | Zip Code<br>54603 |
|-------------------|-------------|-------------------|

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

|                                    |                  |
|------------------------------------|------------------|
| Name of Employer<br>BIG DREAMS LLC | Occupation<br>VP |
|------------------------------------|------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 23 2018

Transaction ID : SA11AI.6199

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FLATEN, JODEEN, , ,**

Mailing Address 255 N MONTE CARLO DRIVE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>EAU CLAIRE | State<br>WI | Zip Code<br>54703 |
|--------------------|-------------|-------------------|

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

|                               |                         |
|-------------------------------|-------------------------|
| Name of Employer<br>HOMEMAKER | Occupation<br>HOMEMAKER |
|-------------------------------|-------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 539.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 22 2018

Transaction ID : SA11AI.6215

Amount of Each Receipt this Period

539.02

☐ Memo Item  
In-kind - EVENT FOOD & BEVERAGE

**C.** Full Name (Last, First, Middle Initial)  
**FORSYTHE, MARK, W., ,**

Mailing Address 35352 FORST LANE

|                          |             |                   |
|--------------------------|-------------|-------------------|
| City<br>PRAIRIE DU CHIEN | State<br>WI | Zip Code<br>53821 |
|--------------------------|-------------|-------------------|

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

|  |                         |
|--|-------------------------|
| Name of Employer<br>PEOPLES STATE BANK | Occupation<br>PRESIDENT |
|--|-------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6130

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

1239.02

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

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HENDRICKS, DIANE, M., ,**

Mailing Address 1 ABC PARKWAY

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>BELOIT | State<br>WI | Zip Code<br>53511 |
|----------------|-------------|-------------------|

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

|                                |                         |
|--------------------------------|-------------------------|
| Name of Employer<br>ABC SUPPLY | Occupation<br>EXECUTIVE |
|--------------------------------|-------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6046

Amount of Each Receipt this Period

2700.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HORMAN, SHERYL, J., ,**

Mailing Address 624 13TH AVENUE S

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>ONALASKA | State<br>WI | Zip Code<br>54650 |
|------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6187

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**IHLE, DAVID, P., ,**

Mailing Address 512 FRANCES AVENUE

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>HUDSON | State<br>MN | Zip Code<br>54016 |
|----------------|-------------|-------------------|

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

|   |                         |
|---|-------------------------|
| Name of Employer<br>NATIONAL BUSINESS SYSTEMS | Occupation<br>PRESIDENT |
|---|-------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 21 2018

Transaction ID : SA11AI.6037

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

3200.00

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

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NAME OF COMMITTEE (In Full)  
TOFT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)  
IHLE, DAVID, P, ,  
Mailing Address 512 FRANCES AVENUE

City State Zip Code  
HUDSON MN 54016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NATIONAL BUSINESS SYSTEMS

Occupation  
PRESIDENT

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6039

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
JACOBS, CODY, , ,  
Mailing Address W22927 FOX COULEE ROAD

City State Zip Code  
GALESVILLE WI 54630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMPIRE SCREEN PRINTING

Occupation  
PRINTING PROFESSIONAL

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

778.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 11 2018

Transaction ID : SA11AI.6224

Amount of Each Receipt this Period

778.18

☐ Memo Item  
In-kind - YARD SIGNS

C. Full Name (Last, First, Middle Initial)  
JACOBS, CODY, , ,  
Mailing Address W22927 FOX COULEE ROAD

City State Zip Code  
GALESVILLE WI 54630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMPIRE SCREEN PRINTING

Occupation  
PRINTING PROFESSIONAL

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1127.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 11 2018

Transaction ID : SA11AI.6226

Amount of Each Receipt this Period

349.36

☐ Memo Item  
In-kind - CAMPAIGN STICKERS

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

1627.54

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

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

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**JACOBS, CODY, , ,**  
Mailing Address **W22927 FOX COULEE ROAD**

City State Zip Code  
**GALESVILLE WI 54630**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer Occupation  
**EMPIRE SCREEN PRINTING PRINTING PROFESSIONAL**

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
**1660.58**

Date of Receipt

M M / D D / Y Y Y Y Y Y  
**04 11 2018**

Transaction ID : **SA11AI.6228**

Amount of Each Receipt this Period

**533.04**

☐ Memo Item  
In-kind - **BANNER**

B. Full Name (Last, First, Middle Initial)  
**JACOBS, CODY, , ,**  
Mailing Address **W22927 FOX COULEE ROAD**

City State Zip Code  
**GALESVILLE WI 54630**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer Occupation  
**EMPIRE SCREEN PRINTING PRINTING PROFESSIONAL**

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
**2510.58**

Date of Receipt

M M / D D / Y Y Y Y Y Y  
**04 11 2018**

Transaction ID : **SA11AI.6230**

Amount of Each Receipt this Period

**850.00**

☐ Memo Item  
In-kind - **BROCHURES**

C. Full Name (Last, First, Middle Initial)  
**JOHNSON, SIDNEY, , , MD**  
Mailing Address **903 W 6TH STREET**

City State Zip Code  
**MARSHFIELD WI 54449**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
**300.00**

Date of Receipt

M M / D D / Y Y Y Y Y Y  
**05 02 2018**

Transaction ID : **SA11AI.6188**

Amount of Each Receipt this Period

**300.00**

☐ Memo Item  
**CONTRIBUTION**

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

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

**1683.04**

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KAPANKE, DANIEL, , ,**

Mailing Address 1610 LAKESHORE DRIVE

City

LA CROSSE

State

WI

Zip Code

54603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

BASEBALL TEAM OWNER

Receipt For: 2018

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 9 |   | 2 | 0 | 1 | 8 |

Transaction ID : SA11AI.6029

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. KRAVIK, MARK, , ,**

Mailing Address 571 280TH STREET

City

OSCEOLA

State

WI

Zip Code

54020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2018

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 6 |   | 2 | 0 | 1 | 8 |

Transaction ID : SA11AI.6126

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. LAURENT, WILLIAM, J., ,**

Mailing Address PO BOX 117

City

MERRILLAN

State

WI

Zip Code

54754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2018

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

568.93

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 5 |   | 2 | 0 | 1 | 8 |

Transaction ID : SA11AI.6222

Amount of Each Receipt this Period

385.00

☐ Memo Item  
In-kind - STORAGE
**SUBTOTAL** of Receipts This Page (optional)..... ▶

1635.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LUDINGTON, PATRICIA, A., ,**  
Mailing Address 244 E LARKSPAR LANE

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>ONALASKA | State<br>WI | Zip Code<br>54650 |
|------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED
 Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 06 / 29 / 2018          |

Transaction ID : SA11AI.6147

Amount of Each Receipt this Period

2700.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MATTIX, ORPHA, I, ,**  
Mailing Address 3335 JILL AVENUE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>EAU CLAIRE | State<br>WI | Zip Code<br>54701 |
|--------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED
 Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

305.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 06 / 29 / 2018          |

Transaction ID : SA11AI.6144

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MITCHELL, JOHN, E, ,**  
Mailing Address E17839 COUNTY HIGHWAY F

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>HILLSBORO | State<br>WI | Zip Code<br>54634 |
|-------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED
 Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 05 / 02 / 2018          |

Transaction ID : SA11AI.6091

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ▶

3800.00

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

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

Use separate schedule(s)  
for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MORGAN, ROBERT, , ,**  
Mailing Address 28850 COZY ACRES LANE

City State Zip Code  
EASTMAN WI 54626

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 21 2018

Transaction ID : SA11AI.6173

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NETWAL, DANIEL, , ,**  
Mailing Address N4555 MARCOU ROAD

City State Zip Code  
ONALASKA WI 54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 16 2018

Transaction ID : SA11AI.6024

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NETWAL, DANIEL, , ,**  
Mailing Address N4555 MARCOU ROAD

City State Zip Code  
ONALASKA WI 54650

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6027

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

1100.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEWCOMER, KERMIT, , ,**  
Mailing Address **N2028 WEDGEWOOD DRIVE E**

City State Zip Code  
**LA CROSSE WI 54601**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt

**06 / 21 / 2018**

Transaction ID : **SA11AI.6107**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NEWCOMER, KERMIT, , ,**  
Mailing Address **N2028 WEDGEWOOD DRIVE E**

City State Zip Code  
**LA CROSSE WI 54601**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
**750.00**

Date of Receipt

**06 / 29 / 2018**

Transaction ID : **SA11AI.6108**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NORDEEN, DEREK, B., ,**  
Mailing Address **1408 KING STREET**

City State Zip Code  
**LA CROSSE WI 54601**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF**

Occupation  
**DENTIST**

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

Date of Receipt

**06 / 29 / 2018**

Transaction ID : **SA11AI.6045**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item  
CONTRIBUTION

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

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

**1250.00**

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

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NAME OF COMMITTEE (In Full)  
TOFT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)  
OKRAY, CHRISTOPHER, E., ,  
Mailing Address 3808 HEFFRON STREET

City State Zip Code  
STEVENS POINT WI 54481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OKRAY FAMILY FARMS

Occupation  
FARMER

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6018

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
OKRAY, JAMES, J., ,  
Mailing Address 1423 RIVERVIEW DRIVE

City State Zip Code  
STEVENS POINT WI 54481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OKRAY FAMILY FARMS

Occupation  
FARMER

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6076

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
OKRAY, RICHARD, , ,  
Mailing Address 2241 OK BLUFF CIRCLE

City State Zip Code  
PLOVER WI 54467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OKRAY FAMILY FARMS INC

Occupation  
AGRI-BUSINESS

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 21 2018

Transaction ID : SA11AI.6165

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

1550.00

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

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|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A.****OLSON, TIMOTHY, , ,**

Mailing Address 2727 PINE VIEW ROAD

City

EAU CLAIRE

State

WI

Zip Code

54703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2018

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 1 |   | 2 | 0 | 1 | 8 |

Transaction ID : SA11AI.6193

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION
**B.**

Full Name (Last, First, Middle Initial)

**PAVELSKI, JEREMIE, , ,**

Mailing Address 4390 DEER ROAD

City

WISCONSIN RAPIDS

State

WI

Zip Code

54494

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HEARTLAND FARMS, INC.

Occupation

FARMER

Receipt For: 2018

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 7 |   | 2 | 0 | 1 | 8 |

Transaction ID : SA11AI.6085

Amount of Each Receipt this Period

2700.00

☐ Memo Item  
CONTRIBUTION
**C.**

Full Name (Last, First, Middle Initial)

**PAVELSKI, RICHARD, , ,**

Mailing Address 145 CHESHIRE WAY

City

NAPLES

State

FL

Zip Code

34110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HEARTLAND FARMS INC

Occupation

FARMING

Receipt For: 2018

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 7 |   | 2 | 0 | 1 | 8 |

Transaction ID : SA11AI.6167

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ▶

5200.00

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

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

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NAME OF COMMITTEE (In Full)  
TOFT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
PISCHKE, RAHN, W, ,

Mailing Address N5660 JORDSON COULEE ROAD

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WEST SALEM | State<br>WI | Zip Code<br>54669 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                    |                           |
|------------------------------------|---------------------------|
| Name of Employer<br>PISCHKE MOTORS | Occupation<br>AUTO DEALER |
|------------------------------------|---------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2018

Transaction ID : SA11AI.6160

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
PRETASKY, DAVID, , ,

Mailing Address 220 17TH STREET S

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>LA CROSSE | State<br>WI | Zip Code<br>54601 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                     |                              |
|-------------------------------------|------------------------------|
| Name of Employer<br>AMERICAN MARINE | Occupation<br>BUSINESS OWNER |
|-------------------------------------|------------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 23 2018

Transaction ID : SA11AI.6036

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
REMIS, PATRICK, K., ,

Mailing Address 1575 N RIVER ROAD

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>BUFFALO CITY | State<br>WI | Zip Code<br>54622 |
|----------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|   |                   |
|---|-------------------|
| Name of Employer<br>REMIS POWER SYSTEMS | Occupation<br>CEO |
|---|-------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6148

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

1000.00

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

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERTS, PAUL, M., ,**  
Mailing Address 530 OLD WAUSAU ROAD

City State Zip Code  
STEVENS POINT WI 54481

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
SELF FARMER

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6151

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SANDERS, DAVID, K., ,**  
Mailing Address 8806 26TH AVENUE

City State Zip Code  
EAU CLAIRE WI 54703

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
MIDSTATES DEVELOPMENT INC REAL ESTATE

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6040

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SCHROEDER, LYND, K., ,**  
Mailing Address 6213 COUNTY ROAD HH

City State Zip Code  
STEVENS POINT WI 54482

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6123

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

1350.00

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

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NAME OF COMMITTEE (In Full)  
TOFT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)  
SCHWINEFUS, MARY, ANN, ,  
Mailing Address W22516 SOBYE LN.

City State Zip Code  
GALESVILLE WI 54630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 16 2018

Transaction ID : SA11AI.6134

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
SLEZAK, MARYBETH, E., ,  
Mailing Address 430 N MAPLE BLUFF ROAD

City State Zip Code  
STEVENS POINT WI 54482

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

BERKSHIRE HATHAWAY

TRAINING SPECIALIST

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 21 2018

Transaction ID : SA11AI.6135

Amount of Each Receipt this Period

750.00

☐ Memo Item  
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
SOMERS, NICK, , ,  
Mailing Address 292 MAPLE BLUFF ROAD

City State Zip Code  
STEVENS POINT WI 54482

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

PLOVER RIVER FARMS ALLIANCE

FARMING

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2018

Transaction ID : SA11AI.6143

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

1250.00

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

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|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**UIHLEIN, RICHARD, , ,**

Mailing Address 1396 N WAUKEGAN RD

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>LAKE FOREST | State<br>IL | Zip Code<br>60045 |
|---------------------|-------------|-------------------|

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

|                           |                         |
|---------------------------|-------------------------|
| Name of Employer<br>ULINE | Occupation<br>CEO/OWNER |
|---------------------------|-------------------------|

Receipt For: 2018  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5100.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 06 / 08 / 2018          |

Transaction ID : SA11AI.5998

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**UIHLEIN, RICHARD, , ,**

Mailing Address 1396 N WAUKEGAN RD

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>LAKE FOREST | State<br>IL | Zip Code<br>60045 |
|---------------------|-------------|-------------------|

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

|                           |                         |
|---------------------------|-------------------------|
| Name of Employer<br>ULINE | Occupation<br>CEO/OWNER |
|---------------------------|-------------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5200.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 06 / 08 / 2018          |

Transaction ID : SA11AI.6164

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VANGEN, LARRY, E., ,**

Mailing Address 424 GILLETTE STREET

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>LA CROSSE | State<br>WI | Zip Code<br>54603 |
|-------------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 05 / 23 / 2018          |

Transaction ID : SA11AI.6112

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

|         |
|---------|
| 2850.00 |
|---------|

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

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WAGNER, SHARI, S., ,**  
Mailing Address E7835 STARLING ROAD

City State Zip Code  
STRUM WI 54470

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6183

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WARNER, JAY, , , Jr.**  
Mailing Address 250 EASTWOOD DRIVE

City State Zip Code  
STEVENS POINT WI 54482

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WARNER & WARNER

Occupation  
OWNER

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2018

Transaction ID : SA11AI.6082

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WIEDENHOEFT, BRADLEY, , ,**  
Mailing Address W18425 LUND ROAD

City State Zip Code  
STRUM WI 54770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOURCECUT

Occupation  
BUSINESS OWNER

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 23 2018

Transaction ID : SA11AI.6010

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

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

3250.00

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

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|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WIEDENHOEFT, BRADLEY, , ,**  
Mailing Address W18425 LUND ROAD

City  
STRUMState  
WIZip Code  
54770FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOURCECUTOccupation  
BUSINESS OWNER

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 29  |   | 2018    |

Transaction ID : SA11AI.6011

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WIEDENHOEFT, BRADLEY, , ,**  
Mailing Address W18425 LUND ROAD

City  
STRUMState  
WIZip Code  
54770FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOURCECUTOccupation  
BUSINESS OWNER

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 29  |   | 2018    |

Transaction ID : SA11AI.6206

Amount of Each Receipt this Period

- 1300.00

☐ Memo Item  
Reattribute: CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WIEDENHOEFT, DARLA, , ,**  
Mailing Address W18425 LUND ROAD

City  
STRUMState  
WIZip Code  
54470FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 29  |   | 2018    |

Transaction ID : SA11AI.6207

Amount of Each Receipt this Period

1300.00

☐ Memo Item  
Reattribute: CONTRIBUTION

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

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

|         |
|---------|
| 2000.00 |
|         |

# **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)

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

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WIESER, DANIEL, J, ,**  
Mailing Address W3322 390TH AVENUE

City State Zip Code  
MAIDEN ROCK WI 54750

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CONSTRUCTION MANAGEMENT

Occupation  
CONSTRUCTION

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2018

Transaction ID : SA11AI.6022

Amount of Each Receipt this Period

700.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WIESER, MARY, , ,**  
Mailing Address W3322 390TH AVENUE

City State Zip Code  
MAIDEN ROCK WI 54750

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2018  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2018

Transaction ID : SA11AI.5996

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WIESER, MARY, , ,**  
Mailing Address W3322 390TH AVENUE

City State Zip Code  
MAIDEN ROCK WI 54750

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6028

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

2000.00

# **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 30 OF 69

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

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NAME OF COMMITTEE (In Full)  
TOFT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)  
WOJCIEHOSKI, RANDAL, F., ,  
Mailing Address 3618 SIMONIS STREET

City State Zip Code  
STEVENS POINT WI 54481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
PHYSICIAN

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6161

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
WORZELLA, MARVIN, , ,  
Mailing Address 2411 OPPORTUNITY LAND

City State Zip Code  
PLOVER WI 54467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
FARMER

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6132

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
ZIETLOW, DONALD, , ,  
Mailing Address PO BOX 1625

City State Zip Code  
LA CROSSE WI 54602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KWIK TRIP INC

Occupation  
COB

Receipt For: 2018  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2018

Transaction ID : SA11AI.5997

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

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

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

800.00

# **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 31 OF 69

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NAME OF COMMITTEE (In Full)  
TOFT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
ZIETLOW, DONALD, , ,

Mailing Address PO BOX 1625

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>LA CROSSE | State<br>WI | Zip Code<br>54602 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                   |                   |
|-----------------------------------|-------------------|
| Name of Employer<br>KWIK TRIP INC | Occupation<br>COB |
|-----------------------------------|-------------------|

Receipt For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2018

Transaction ID : SA11AI.6048

Amount of Each Receipt this Period

700.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ZIETLOW, DONALD, , ,

Mailing Address PO BOX 1625

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>LA CROSSE | State<br>WI | Zip Code<br>54602 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. C

|                                   |                   |
|-----------------------------------|-------------------|
| Name of Employer<br>KWIK TRIP INC | Occupation<br>COB |
|-----------------------------------|-------------------|

Receipt For: 2018  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 29 2018

Transaction ID : SA11AI.6049

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

**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 Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1700.00

44864.60

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BUDDY PAC**

**A.**

Mailing Address 824 S MILLEDGE AVE STE 101

City  
 ATHENS

State  
 GA

Zip Code  
 30605

FEC ID number of contributing  
federal political committee.

**C** C00597062

Name of Employer

Occupation

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 29 2018

Transaction ID : SA11C.6203

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PROSPERITY ACTION INC.**

**B.**

Mailing Address 320 1ST STREET SE

City  
 WASHINGTON

State  
 DC

Zip Code  
 20003

FEC ID number of contributing  
federal political committee.

**C** C00377689

Name of Employer

Occupation

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 15 2018

Transaction ID : SA11C.6157

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**THIRD DISTRICT REPUBLICAN PARTY**

**C.**

Mailing Address PO BOX 36

City  
 EAU CLAIRE

State  
 WI

Zip Code  
 54702

FEC ID number of contributing  
federal political committee.

**C** C99003428

Name of Employer

Occupation

Receipt For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 29 2018

Transaction ID : SA11C.6286

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
 CONTRIBUTION

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

9000.00

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

9000.00

# **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)

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

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NAME OF COMMITTEE (In Full)  
TOFT FOR CONGRESS

|   |             |   |  |  |
|---|-------------|---|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>TOFT, STEVE, , ,     |             |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>06 20 2018 |  |
| Mailing Address 13213 THOMAS STREET                                       |             |   | <b>Transaction ID : SA11D.6213</b>                     |  |
| City<br>OSSEO   | State<br>WI | Zip Code<br>54758   | Amount of Each Receipt this Period<br>420.78           |  |
| FEC ID number of contributing federal political committee.<br>C H8WI03103 |             | Name of Employer<br>RETIRED   |  |  |
| Occupation<br>RETIRED   |             | Receipt For: 2018<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| Election Cycle-to-Date ▼<br>32566.34                                      |             | <input type="checkbox"/> Memo Item<br>In-kind - EVENT FOOD & BEVERAGE   |  |  |

|   |       |   |  |  |
|---|-------|---|--|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)               |       |   | Date of Receipt<br>M M / D D / Y Y Y Y Y |  |
| Mailing Address   |       |   | Amount of Each Receipt this Period       |  |
| City  | State | Zip Code  | <input type="checkbox"/> Memo Item       |  |
| FEC ID number of contributing federal political committee.<br>C |       | Name of Employer  |  |  |
| Occupation  |       | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| Election Cycle-to-Date ▼  |       | Amount of Each Receipt this Period  |  |  |

|   |       |   |  |  |
|---|-------|---|--|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)               |       |   | Date of Receipt<br>M M / D D / Y Y Y Y Y |  |
| Mailing Address   |       |   | Amount of Each Receipt this Period       |  |
| City  | State | Zip Code  | <input type="checkbox"/> Memo Item       |  |
| FEC ID number of contributing federal political committee.<br>C |       | Name of Employer  |  |  |
| Occupation  |       | Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| Election Cycle-to-Date ▼  |       | Amount of Each Receipt this Period  |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 420.78 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 420.78 |

**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 34 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL EXPENSES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 6 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1287.36

Transaction ID : SB17.5983

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCCLAIN, TODD, , ,**

Mailing Address 1431 CUMMINGS AVENUE

City  
EAU CLAIREState  
WIZip Code  
54701Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 8 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1287.36

Transaction ID : SB17.5983.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

382.14

Transaction ID : SB17.5969

☐ Memo Item

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

1669.50

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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|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL EXPENSES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1287.36

Transaction ID : SB17.5984

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCCLAIN, TODD, , ,**

Mailing Address 1431 CUMMINGS AVENUE

City  
EAU CLAIREState  
WIZip Code  
54701Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1287.36

Transaction ID : SB17.5984.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

51.50

Transaction ID : SB17.5959

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1338.86

**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 36 OF 69

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 16  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

382.14

Transaction ID : SB17.5970

☐ Memo Item**B. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 29  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

51.50

Transaction ID : SB17.5960

☐ Memo Item**C. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL EXPENSES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 29  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2055.93

Transaction ID : SB17.5985

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2489.57

**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 37 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MCCLAIN, TODD, , ,**

Mailing Address 1431 CUMMINGS AVENUE

City  
EAU CLAIREState  
WIZip Code  
54701Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 9 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1287.36

Transaction ID : SB17.5985.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. COYLE, ETHAN, , ,**

Mailing Address PO BOX 68

City  
OSSEOState  
WIZip Code  
53758Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 8 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

768.57

Transaction ID : SB17.5985.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

692.32

Transaction ID : SB17.5977

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

692.32

**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 38 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

643.68

Transaction ID : SB17.5975

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL EXPENSES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2853.33

Transaction ID : SB17.5988

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COYLE, ETHAN, , ,**

Mailing Address PO BOX 68

City  
OSSEOState  
WIZip Code  
53758Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 13  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1158.36

Transaction ID : SB17.5988.0

☒ Memo Item

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

3497.01

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 39 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MCCLAIN, TODD, , ,**

Mailing Address 1431 CUMMINGS AVENUE

City  
EAU CLAIREState  
WIZip Code  
54701Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

643.68

Transaction ID : SB17.5988.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROCQUE, THOMAS, , ,**

Mailing Address PO BOX 68

City  
OSSEOState  
WIZip Code  
53758Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1051.29

Transaction ID : SB17.5988.2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 4 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

51.50

Transaction ID : SB17.5961

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

51.50

**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 40 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 18  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1216.12

Transaction ID : SB17.5982

☐ Memo Item**B. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 27  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

643.68

Transaction ID : SB17.5976

☐ Memo Item**C. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL EXPENSES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 27  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2430.46

Transaction ID : SB17.5987

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4290.26

**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 41 OF 69

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. COYLE, ETHAN, , ,**

Mailing Address PO BOX 68

City  
OSSEOState  
WIZip Code  
53758Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 27  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1158.36

Transaction ID : SB17.5987.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCCLAIN, TODD, , ,**

Mailing Address 1431 CUMMINGS AVENUE

City  
EAU CLAIREState  
WIZip Code  
54701Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 27  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

643.68

Transaction ID : SB17.5987.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROCQUE, THOMAS, , ,**

Mailing Address PO BOX 68

City  
OSSEOState  
WIZip Code  
53758Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 27  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

628.42

Transaction ID : SB17.5987.2

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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)

PAGE 42 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 8 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

51.50

Transaction ID : SB17.5962

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACUITY**

Mailing Address PO BOX 718

City  
SHEBOYGANState  
WIZip Code  
53081Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 0 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

336.00

Transaction ID : SB17.5968

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ASPECT CONSULTING LLC**

Mailing Address 8401 EXCELSIOR DR

City  
MADISONState  
WIZip Code  
53717Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

640.00

Transaction ID : SB17.5974

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1027.50

**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 43 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ASPECT CONSULTING LLC**

Mailing Address 8401 EXCELSIOR DR

City  
MADISONState  
WIZip Code  
53717Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 8 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2132.05

Transaction ID : SB17.5986

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ASPECT CONSULTING LLC**

Mailing Address 8401 EXCELSIOR DR

City  
MADISONState  
WIZip Code  
53717Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1085.00

Transaction ID : SB17.5980

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BINVERSIE, KEVIN, , ,**

Mailing Address 523 PINE STREET

City  
SHEBOYGAN FALLSState  
WIZip Code  
53085Purpose of Disbursement  
ONLINE MEDIA

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5972

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3717.05

**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 44 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BINVERSIE, KEVIN, , ,**

Mailing Address 523 PINE STREET

City  
SHEBOYGAN FALLSState  
WIZip Code  
53085Purpose of Disbursement  
ONLINE MEDIA

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 06  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5978

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 06  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.5991

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 06  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

896.79

Transaction ID : SB17.6246

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4896.79

**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 45 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 4538 VERONA ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 14  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.6246.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. STAPLES**

Mailing Address 4538 VERONA ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 05  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

89.32

Transaction ID : SB17.6246.2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. STAPLES**

Mailing Address 4538 VERONA ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 05  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.6246.3

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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)

PAGE 46 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 4538 VERONA ROAD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 23  |   | 2018    |

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

58.15

Transaction ID : SB17.6246.5

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. STAPLES**

Mailing Address 4538 VERONA ROAD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 14  |   | 2018    |

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

146.81

Transaction ID : SB17.6246.6

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 04  |   | 2018    |

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1098.61

Transaction ID : SB17.5981

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1098.61

**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 47 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address 7341 WEST TOWNE WAY

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 17  | 2018    |

City  
MADISONState  
WIZip Code  
53719Purpose of Disbursement  
POSTAGE

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.5981.0

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT**

Mailing Address 7341 WEST TOWNE WAY

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 17  | 2018    |

City  
MADISONState  
WIZip Code  
53719Purpose of Disbursement  
OFFICE SUPPLIES

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

52.79

Transaction ID : SB17.5981.1

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 155 E OAK ST

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 25  | 2018    |

City  
LAKE MILLSState  
WIZip Code  
53551Purpose of Disbursement  
POSTAGE

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5981.2

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

0.00

**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)

PAGE 48 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 4538 VERONA ROAD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 25  |   | 2018    |

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
PRINTING

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

76.59

Transaction ID : SB17.5981.3

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. STAPLES**

Mailing Address 4538 VERONA ROAD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 17  |   | 2018    |

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
PRINTING

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

87.57

Transaction ID : SB17.5981.4

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. LA CROSSE MAIL & PRINT**

Mailing Address 1501 ST ANDREWS ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 13  |   | 2018    |

City  
LA CROSSEState  
WIZip Code  
54603Purpose of Disbursement  
PRINTING

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

227.98

Transaction ID : SB17.5981.5

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

0.00

**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)

PAGE 49 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LA CROSSE MAIL & PRINT**

Mailing Address 1501 ST ANDREWS ST

City  
LA CROSSEState  
WIZip Code  
54603Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 13  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

153.68

Transaction ID : SB17.5981.6

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 04  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.5989

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.5990

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

**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)

PAGE 50 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. DAN MORSE CONSULTING LLC**

Mailing Address 5205 BARTON ROAD

City  
MADISONState  
WIZip Code  
53711Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 01  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

479.43

Transaction ID : SB17.6263

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LA CROSSE MAIL & PRINT**

Mailing Address 1501 ST ANDREWS ST

City  
LA CROSSEState  
WIZip Code  
54603Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 31  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

333.79

Transaction ID : SB17.6263.3

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FLADEBOE, DAVID, , ,**

Mailing Address 10 N LIVINGSTON ST

City  
MADISONState  
WIZip Code  
53705Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 27  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

547.08

Transaction ID : SB17.5973

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1026.51

**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 51 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FLADEBOE, DAVID, , ,**

Mailing Address 10 N LIVINGSTON ST

City  
MADISONState  
WIZip Code  
53705Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 2 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

435.89

Transaction ID : SB17.5971

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 6 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

378.92

Transaction ID : SB17.5971.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FLATEN, JODEEN, , ,**

Mailing Address 255 N MONTE CARLO DRIVE

City  
EAU CLAIREState  
WIZip Code  
54703Purpose of Disbursement  
In-kind - EVENT FOOD & BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
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| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 2 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

539.02

Transaction ID : SB17.6217

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

974.91

**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 52 OF 69

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. JACOBS, CODY, , ,**

Mailing Address W22927 FOX COULEE ROAD

City  
GALESVILLEState  
WIZip Code  
54630Purpose of Disbursement  
In-kind - YARD SIGNS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

778.18

Transaction ID : SB17.6225

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JACOBS, CODY, , ,**

Mailing Address W22927 FOX COULEE ROAD

City  
GALESVILLEState  
WIZip Code  
54630Purpose of Disbursement  
In-kind - CAMPAIGN STICKERS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

349.36

Transaction ID : SB17.6227

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JACOBS, CODY, , ,**

Mailing Address W22927 FOX COULEE ROAD

City  
GALESVILLEState  
WIZip Code  
54630Purpose of Disbursement  
In-kind - BANNER

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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|---|---|---|---|---|---|---|---|---|---|
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| 0 | 4 |   | 1 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

533.04

Transaction ID : SB17.6229

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1660.58

**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 53 OF 69

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. JACOBS, CODY, , ,**

Mailing Address W22927 FOX COULEE ROAD

City  
GALESVILLEState  
WIZip Code  
54630Purpose of Disbursement  
In-kind - BROCHURES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M M | / | D D | / | Y Y Y Y |
| 04  |   | 11  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

850.00

Transaction ID : SB17.6231

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LAURENT, WILLIAM, J., ,**

Mailing Address PO BOX 117

City  
MERRILLANState  
WIZip Code  
54754Purpose of Disbursement  
In-kind - STORAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 15  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

385.00

Transaction ID : SB17.6223

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCCLAIN, TODD, , ,**

Mailing Address 1431 CUMMINGS AVENUE

City  
EAU CLAIREState  
WIZip Code  
54701Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 04  |   | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

219.84

Transaction ID : SB17.5965

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1454.84

**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 54 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

119.84

Transaction ID : SB17.5965.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCCLAIN, TODD, , ,**

Mailing Address 1431 CUMMINGS AVENUE

City

EAU CLAIRE

State

WI

Zip Code

54701

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1062.73

Transaction ID : SB17.5979

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 3 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

353.92

Transaction ID : SB17.5979.0

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1062.73

**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 55 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF WISCONSIN**

Mailing Address 148 E JOHNSON ST

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 13  | 2018    |

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
EVENT TICKETS

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

255.00

Transaction ID : SB17.5979.1

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. HYATT REGENCY**

Mailing Address 333 W KILBOURN

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 13  | 2018    |

City  
MILWAUKEEState  
WIZip Code  
53203Purpose of Disbursement  
TRAVEL EXPENSE

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

453.81

Transaction ID : SB17.5979.2

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. PERSUASION PARTNERS INC.**

Mailing Address 106 E DOTY STREET

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 25  | 2018    |

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
ONLINE MEDIA

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.5994

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

5000.00

**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)

PAGE 56 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.5940

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 9 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.5941

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
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| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.5942

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8.10

**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 57 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
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| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 4 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

12.50

Transaction ID : SB17.5953

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 1 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.50

Transaction ID : SB17.5935

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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| 0 | 4 |   | 2 | 5 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.44

Transaction ID : SB17.5945

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

16.44

**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 58 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.15

Transaction ID : SB17.5947

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 3 | 0 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.48

Transaction ID : SB17.5938

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 2 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.48

Transaction ID : SB17.5939

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8.11

**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 59 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

230.00

Transaction ID : SB17.5966

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 6 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8.60

Transaction ID : SB17.5951

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.50

Transaction ID : SB17.5936

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

239.10

**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 60 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 21  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.15

Transaction ID : SB17.5948

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 05  | 23  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.35

Transaction ID : SB17.5956

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 03  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.15

Transaction ID : SB17.5949

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

30.65

**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 61 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 06  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.5943

☐ Memo Item**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 08  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

127.65

Transaction ID : SB17.5964

☐ Memo Item**C. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 15  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.15

Transaction ID : SB17.5950

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

135.50

**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 62 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 20  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

12.50

Transaction ID : SB17.5954

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 21  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

57.85

Transaction ID : SB17.5963

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 22  | 2018    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.5944

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

73.05

**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 63 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 6 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15.20

Transaction ID : SB17.5955

☐ Memo Item**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 7 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

230.80

Transaction ID : SB17.5967

☐ Memo Item**C. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 9 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

4.18

Transaction ID : SB17.5946

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

250.18

**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 64 OF 69

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.80

Transaction ID : SB17.5952

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RAISE THE MONEY**

Mailing Address PO BOX 26466

City  
LITTLE ROCKState  
ARZip Code  
72221Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C

Amount of Each Disbursement this Period

21.83

Transaction ID : SB17.5957

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TOFT, STEVE, , ,**

Mailing Address 13213 THOMAS STREET

City  
OSSEOState  
WIZip Code  
54758Purpose of Disbursement  
In-kind - EVENT FOOD & BEVERAGE

Candidate Name

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI

District: 03

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 0 |   | 2 | 0 | 1 | 8 |

FEC Identification Number

C H8WI03103

Amount of Each Disbursement this Period

420.78

Transaction ID : SB17.6214

☐ Memo Item

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

453.41

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 65 OF 69

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

TOFT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. VICTORY STRATEGIES**

Mailing Address PO BOX 2152

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 13  | 2018    |

City  
MADISONState  
WIZip Code  
53701Purpose of Disbursement  
STRATEGY CONSULTING

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.5992

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. VICTORY STRATEGIES**

Mailing Address PO BOX 2152

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04  | 30  | 2018    |

City  
MADISONState  
WIZip Code  
53701Purpose of Disbursement  
STRATEGY CONSULTING

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.5993

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. VICTORY STRATEGIES**

Mailing Address PO BOX 2152

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 06  | 01  | 2018    |

City  
MADISONState  
WIZip Code  
53701Purpose of Disbursement  
STRATEGY CONSULTING

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.5995

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

15000.00

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

58163.08

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 66 OF 69

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**Transaction ID : **SC/10.4318****LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

**TOFT, STEVE, , ,**☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
13213 THOMAS STREET

City

State

ZIP Code

OSSEO

WI

54758

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 10 M /

D 16 D /

Y 2017 Y

M M /

D D /

Y 12/31/2028 Y

0.00

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 67 OF 69

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**Transaction ID : **SC/10.4319****LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item**TOFT, STEVE, , ,**

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

13213 THOMAS STREET

City

OSSEO

State

WI

ZIP Code

54758

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 12<sup>M</sup>/ D 28<sup>D</sup>

/ Y 2017 Y

M M

/ D D

/ Y 12/31/2028 Y

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 68 OF 69

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**Transaction ID : **SC/10.4624****LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item**TOFT, STEVE, , ,**

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

13213 THOMAS STREET

City

OSSEO

State

WI

ZIP Code

54758

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 02 /

D 21 /

Y 2018 Y

M M /

D D /

Y 12/31/2028 Y

9.00

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
**TOFT FOR CONGRESS**Transaction ID : **SC/10.4625****LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item**TOFT, STEVE, , ,**

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

13213 THOMAS STREET

City

OSSEO

State

WI

ZIP Code

54758

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03<sup>M</sup> /D 14<sup>D</sup> /

Y 2018 Y

M M /

D D /

Y 12/31/2028 Y

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10000.00

**TOTALS** This Period (last page in this line only).....▶

30000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.