

# 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  
Sensenbrenner Committee

ADDRESS (number and street) PO Box 575  
 Check if different than previously reported. (ACC) Brookfield WI 53008

2. **FEC IDENTIFICATION NUMBER** ▼ C C00083428 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
WI 05

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 10 / 01 / 2013 through M M / D D / Y Y Y Y 12 / 31 / 2013

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

Type or Print Name of Treasurer John P. Savage  
Signature of Treasurer John P. Savage *[Electronically Filed]* Date M M / D D / Y Y Y Y 01 / 27 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Sensenbrenner Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	36997.59	148555.66
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	36997.59	148555.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	25525.84	152549.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	313.46
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	25525.84	152236.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	297333.14	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Sensenbrenner Committee**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12800.00	40450.00
(ii) Unitemized.....	9697.59	47105.66
(iii) TOTAL of contributions from individuals ▶	22497.59	87555.66
(b) Political Party Committees.....	500.00	500.00
(c) Other Political Committees (such as PACs).....	14000.00	60500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	36997.59	148555.66
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	313.46
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	22.79	105.41
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	37020.38	148974.53

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25525.84	152549.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	25525.84	152549.69

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	285838.60
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	37020.38
25. SUBTOTAL (add Line 23 and Line 24).....	322858.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25525.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	297333.14

**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 5 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Betty-Alice Anderson**

Mailing Address 31745 W. Muscovy Road

City Hartland State WI Zip Code 53029

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : C-25-000077500015**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Tom Balistreri**

Mailing Address 618 Stonegate Pass

City Colgate State WI Zip Code 53017

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

Name of Employer Sendik's Fine Foods Occupation Retired Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 11 / 2013

**Transaction ID : C-45-000116810003**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Berg**

Mailing Address 1962 Robins Run Road

City Hartford State WI Zip Code 53027

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

Name of Employer Custom Pak Products, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C-87-000117030003**

Amount of Each Receipt this Period  
75.00

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

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

375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Bernice Boucher**

Mailing Address 4585 N. Sawyer Road

City Oconomowoc State WI Zip Code 53066

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

Name of Employer N/A Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : C-125-000049540014**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Steven Boysa**

Mailing Address 31128 Thompson Lane

City Hartland State WI Zip Code 53029

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

Name of Employer Self Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 19 / 2013

**Transaction ID : C-134-000087050003**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Lyn and Jim Burhop**

Mailing Address 2380 Country Rd. CC

City Hartford State WI Zip Code 53027

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

Name of Employer Brookfield Surgical Associates Occupation General and Vascular Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C-166-000116080002**

Amount of Each Receipt this Period  
**250.00**

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

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

**850.00**

**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 7 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Cowen**

Mailing Address 9617 N. Juniper Circle

City Mequon State WI Zip Code 53092

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

Name of Employer Badger Alloys, Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C-220-00010970003**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Smith Davis**

Mailing Address 1333 New Hampshire Avenue, NW, Ste

City Washington State DC Zip Code 20036

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

Name of Employer Akin, Gump, Strauss, Hauer & Feld LLC Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C-249-000082930007**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ahmad Eslami**

Mailing Address 16160 Shore Line Dr.

City Brookfield State WI Zip Code 53005

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

Name of Employer Self Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C-327-000121240003**

Amount of Each Receipt this Period  
 250.00

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

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

3000.00



**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 9 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Gibson**

Mailing Address 5040 Glenbrook Ter, NW

City Washington State DC Zip Code 20016

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

Name of Employer The Gibson Group Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : C-391-000076740008**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Steven Girard**

Mailing Address N4800 Pinecrest Dr.

City Nashotah State WI Zip Code 53058

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 23 / 2013

**Transaction ID : C-401-000128800001**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**William Greaves**

Mailing Address 8851 N Bayside Dr

City Bayside State WI Zip Code 53217

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

Name of Employer ABPM Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : C-426-000017120006**

Amount of Each Receipt this Period  
250.00

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Trevor and Maureen Harder**

Mailing Address 441 Wildwood Ridge

City State Zip Code  
Colgate WI 53017

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : C-460-00077740012**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**David Haskell**

Mailing Address 1255 Lakeside Dr.

City State Zip Code  
Elm Grove WI 53122

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

Name of Employer Occupation  
Self Orthopedic Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C-470-000126560002**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ann Heacox**

Mailing Address W229 S8785 Mulberry Street

City State Zip Code  
Big Bend WI 53103

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

Name of Employer Occupation  
N/A housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : C-474-000108400008**

Amount of Each Receipt this Period  
100.00

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

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

850.00

**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 11 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Henry Herzing**

Mailing Address 1660 N. Pospect Ave., Unit 1009

City Milwaukee	State WI	Zip Code 53202
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FEC ID number of contributing federal political committee. **C**

Name of Employer Chancellor	Occupation Herzing University
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Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : C-489-000120300004**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Allan Kieckhafer**

Mailing Address 818 Crestview Drive

City West Bend	State WI	Zip Code 53095
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Retired
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Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 04 / 2013

**Transaction ID : C-601-000030430008**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kimberly Knudsen**

Mailing Address N7344 Lorwood Dr.

City Whitewater	State WI	Zip Code 53190
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C-623-000128340001**

Amount of Each Receipt this Period  
500.00

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Arleen Koenigs**

Mailing Address W136 N7707 N Hills Dr.

City: Menomonee Falls      State: WI      Zip Code: 53051

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

Name of Employer: N/A      Occupation: Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 12 / 02 / 2013

**Transaction ID : C-625-000072680006**

Amount of Each Receipt this Period: 400.00

EAR-> Republican Party of Waukesha Count

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

Mailing Address 2620 Bartlett Drive

City: Brookfield      State: WI      Zip Code: 53045

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

Name of Employer: North Shore Bank      Occupation: President and COO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 12 / 16 / 2013

**Transaction ID : C-772-000113220004**

Amount of Each Receipt this Period: 250.00

EAR-> Alliance of Bankers for Wisconsin

**C.** Full Name (Last, First, Middle Initial)  
**Harvey Mikulecky**

Mailing Address 1038 S. Waterville Rd.

City: Oconomowoc      State: WI      Zip Code: 53066

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

Name of Employer: N/A      Occupation: Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 12 / 02 / 2013

**Transaction ID : C-789-000123630003**

Amount of Each Receipt this Period: 100.00

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

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

750.00

**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 13 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Sandra Mills**

Mailing Address 1500 Rue Reynard

City Menasha	State WI	Zip Code 54952
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Ph.D. Researcher in Education
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C-794-000128860001**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dale Nordeen**

Mailing Address 4206 Yuma Drive

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 11 / 2013

**Transaction ID : C-851-000058750029**

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
**John Ogden**

Mailing Address 1844 N. Prospect Avenue, #215S

City Milwaukee	State WI	Zip Code 53202
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ogden & Company Inc	Occupation Real Est. Broker
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Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 28 / 2013

**Transaction ID : C-869-000008790037**

Amount of Each Receipt this Period  
100.00

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

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

1175.00

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

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

FOR LINE NUMBER: PAGE 14 OF 41  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**John Parker**

Mailing Address 1380 W. Wisconsin Avenue, Apt. 117

City Oconomowoc State WI Zip Code 53066

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C-895-00009410038**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Eugene Philipp**

Mailing Address 12310 Woodside Ct.

City Wauwatosa State WI Zip Code 53226

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 11 / 2013

**Transaction ID : C-921-000122380004**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Harry Pursel**

Mailing Address P. O. Box 248

City Danbury State WI Zip Code 54830

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 18 / 2013

**Transaction ID : C-951-000091220030**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

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

\_\_\_\_\_ 450.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 15 OF 41  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Remington**  
 Mailing Address 1031 N. Edgewood St.  
 City State Zip Code  
 Arlington VA 22201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Drinker Biddle Partner  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 27 / 2013  
**Transaction ID : C-978-00064490011**  
 Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**John Scepanski**  
 Mailing Address 455 E. Morgan Avenue  
 City State Zip Code  
 Milwaukee WI 53207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 02 / 2013  
**Transaction ID : C-1028-000125070003**  
 Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Marie Schmidt**  
 Mailing Address 5778 Apple Blossom Ln.  
 City State Zip Code  
 West Bend WI 53095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Homemaker  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 11 / 2013  
**Transaction ID : C-1044-000117660002**  
 Amount of Each Receipt this Period  
 250.00

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

750.00

**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 16 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Donald Schmitz**

Mailing Address 2309 Barberry Court

City: Waukesha State: WI Zip Code: 53188

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

Name of Employer: Cox Plumbing Occupation: Plumber

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 275.00

Date of Receipt: 12 / 11 / 2013

**Transaction ID : C-1048-000108950007**

Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Star**

Mailing Address 19045 Thomson Drive, Unit I-204

City: Brookfield State: WI Zip Code: 53045

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

Name of Employer: Engman - Taylor Co. Occupation: Chairman of the Board

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 12 / 02 / 2013

**Transaction ID : C-1147-000114260007**

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Krista Stark**

Mailing Address 1715 Braddock Pl., #302

City: Alexandria State: VA Zip Code: 22302

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

Name of Employer: The Normandy Group Occupation: Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 11 / 27 / 2013

**Transaction ID : C-1149-000084860008**

Amount of Each Receipt this Period: 500.00

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

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

850.00

**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 17 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**John and Sherry Wenum**

Mailing Address 427 Hunters Hill Trail

City State Zip Code  
Colgate WI 53017

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

Name of Employer Occupation  
Tess Corporation VP of Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 27 / 2013

**Transaction ID : C-1272-000116770003**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Brian Zimmer**

Mailing Address 1432 Laburnum Street

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
Coalition for a Secure Driver's Licens President / Non-Profit Exec.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : C-1336-000106350007**

Amount of Each Receipt this Period  
250.00

**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

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

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

500.00

12800.00

**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 18 OF 41	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Washington County Republican Party**

Mailing Address **PO BOX 671**

City **West Bend** State **WI** Zip Code **53095**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2013

**Transaction ID : C-1258-000052370001**

Amount of Each Receipt this Period  

500.00
--------

**B.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period  

--

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period  

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

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

500.00
500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**AT&T Federal PAC**

Mailing Address 208 S. Akard St., Ste. 2701

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : C-2-000045920029**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Akin, Gump, Strauss, Hauer & Feld**

Mailing Address 1333 New Hampshire Ave,NW 400

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : C-12-000031620023**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**American Intellectual Property Law Assoc.**

Mailing Address 241 18th Street South, Suite 700

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00156935

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2013

**Transaction ID : C-18-000075450012**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

**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 20 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**American Motorcyclist PAC**

Mailing Address 13515 Yarmouth Drive

City Pickerington State OH Zip Code 43147

FEC ID number of contributing federal political committee. **C** C00120238

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : C-21-000073440011**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CULAC PAC**

Mailing Address 601 Pennsylvania Avenue, NW  
South Building, Suite 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2013

**Transaction ID : C-173-000075460011**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dow Lohnes PAC**

Mailing Address 1200 New Hampshire Avenue, Suite 8

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00346189

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 02 / 2013

**Transaction ID : C-284-000117220002**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

**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 21 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A. Drinker Biddle PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1500 K Street, NW, Suite 1100

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00370759**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		27		2013

**Transaction ID : C-293-000080380010**

Amount of Each Receipt this Period  
1000.00

**B. Honeywell International PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 101 Constitution Ave., NW, Suite 5

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		20		2013

**Transaction ID : C-515-000073850013**

Amount of Each Receipt this Period  
2000.00

**C. NFIB Safe Trust**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1201 F Street, NW, Suite 200

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00101105**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		21		2013

**Transaction ID : C-817-000048100012**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

**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 22 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

**A.** Full Name (Last, First, Middle Initial)  
**NRA Political Victory Fund**

Mailing Address 11250 Waples Mill Rd.

City Fairfax	State VA	Zip Code 22030
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C-818-000061200013**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**National Association of Realtors PAC**

Mailing Address 430 N. Michigan Avenue

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 10 / 2013

**Transaction ID : C-966-000027310029**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 55 Glenlake Pkwy, NE

City Atlanta	State GA	Zip Code 30328
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : C-1207-000030370021**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

14000.00

**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 23 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>US Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2013
Mailing Address P. O. Box 1800		<b>Transaction ID : C-1219-000031480250</b>
City Saint Paul	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7.68
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 105.41	

Full Name (Last, First, Middle Initial) <b>US Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2013
Mailing Address P. O. Box 1800		<b>Transaction ID : C-1220-000031480251</b>
City Saint Paul	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7.43
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 105.41	

Full Name (Last, First, Middle Initial) <b>US Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address P. O. Box 1800		<b>Transaction ID : C-1221-000031480252</b>
City Saint Paul	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7.68
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 105.41	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	22.79
<b>TOTAL</b> This Period (last page this line number only).....	22.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. 120 Building Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 120 Bishops Way, Room 111			Amount of Each Disbursement this Period 335.00 <b>Transaction ID : D11-000120150018</b>
City Brookfield	State WI	Zip Code 53005	
Purpose of Disbursement Rent		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. 120 Building Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 120 Bishops Way, Room 111			Amount of Each Disbursement this Period 335.00 <b>Transaction ID : D12-000120150019</b>
City Brookfield	State WI	Zip Code 53005	
Purpose of Disbursement Rent		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. 120 Building Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 120 Bishops Way, Room 111			Amount of Each Disbursement this Period 335.00 <b>Transaction ID : D13-000120150020</b>
City Brookfield	State WI	Zip Code 53005	
Purpose of Disbursement Rent		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1005.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 80.80 <b>Transaction ID : D27-000120280017</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Mobile Phone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 80.80 <b>Transaction ID : D28-000120280018</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Mobile Phone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 82.97 <b>Transaction ID : D29-000120280019</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Mobile Phone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	244.97
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address PO BOX 598011		Amount of Each Disbursement this Period 114.84 <b>Transaction ID : D43-000052270178</b>
City Orlando State FL Zip Code 32859	Purpose of Disbursement Phone/ Internet Candidate Name Category/ Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address PO BOX 598011		Amount of Each Disbursement this Period 123.85 <b>Transaction ID : D44-000052270179</b>
City Orlando State FL Zip Code 32859	Purpose of Disbursement Phone/ Internet Candidate Name Category/ Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address PO BOX 598011		Amount of Each Disbursement this Period 119.54 <b>Transaction ID : D45-000052270180</b>
City Orlando State FL Zip Code 32859	Purpose of Disbursement Phone/ Internet Candidate Name Category/ Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	358.23
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. Colonial Quality Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013		
Mailing Address 2997 S. Howell Avenue			Amount of Each Disbursement this Period 610.37		
City Milwaukee	State WI	Zip Code 53207	Transaction ID : D62-000052640094		
Purpose of Disbursement Envelopes/ letterhead		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Christopher Jenkyns</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013		
Mailing Address 463 Park Place			Amount of Each Disbursement this Period 166.23		
City Kewaskum	State WI	Zip Code 53040	Transaction ID : D114-000120050035		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Christopher Jenkyns</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013		
Mailing Address 463 Park Place			Amount of Each Disbursement this Period 142.80		
City Kewaskum	State WI	Zip Code 53040	Transaction ID : D115-000120050036		
Purpose of Disbursement Mileage reimbursement		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	919.40
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. Christopher Jenkyns</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 463 Park Place		Amount of Each Disbursement this Period 108.05 <b>Transaction ID : D116-000120050037</b>
City Kewaskum	State WI	
Zip Code 53040	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Christopher Jenkyns</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 463 Park Place		Amount of Each Disbursement this Period 142.80 <b>Transaction ID : D117-000120050038</b>
City Kewaskum	State WI	
Zip Code 53040	Purpose of Disbursement Mileage Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Christopher Jenkyns</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 463 Park Place		Amount of Each Disbursement this Period 155.14 <b>Transaction ID : D118-000120050039</b>
City Kewaskum	State WI	
Zip Code 53040	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	405.99
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 41		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. Christopher Jenkyns</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 463 Park Place		Amount of Each Disbursement this Period 107.10 <b>Transaction ID : D119-000120050040</b>
City Kewaskum	State WI	
Zip Code 53040	Purpose of Disbursement Mileage reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paperless Transaction Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 400 E. Royal Ln., Suite 201		Amount of Each Disbursement this Period 56.40 <b>Transaction ID : D165-000119640021</b>
City Irving	State TX	
Zip Code 75039	Purpose of Disbursement Merchant Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Paperless Transaction Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address 400 E. Royal Ln., Suite 201		Amount of Each Disbursement this Period 71.67 <b>Transaction ID : D166-000119640022</b>
City Irving	State TX	
Zip Code 75039	Purpose of Disbursement Merchant fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	235.17
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. Paperless Transaction Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 400 E. Royal Ln., Suite 201		Amount of Each Disbursement this Period 94.44
City Irving	State TX	
Zip Code 75039	Purpose of Disbursement Merchant Fee	Transaction ID : D167-000119640023
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Prosper Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 435 East Main Street, Suite 250		Amount of Each Disbursement this Period 35.00
City Greenwood	State IN	
Zip Code 46143	Purpose of Disbursement Emails	Transaction ID : D174-000125720003
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Briton Schiel</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 3105 N 93rd Street		Amount of Each Disbursement this Period 1262.75
City Milwaukee	State WI	
Zip Code 53222	Purpose of Disbursement Salary	Transaction ID : D207-000115820028
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1392.19
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. Briton Schiel</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 3105 N 93rd Street		Amount of Each Disbursement this Period 1262.74
City Milwaukee	State WI	
Zip Code 53222	Purpose of Disbursement Salary	Transaction ID : D208-000115820029
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Briton Schiel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 3105 N 93rd Street		Amount of Each Disbursement this Period 1387.35
City Milwaukee	State WI	
Zip Code 53222	Purpose of Disbursement Salary	Transaction ID : D209-000115820030
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sumner360</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 811 North Carolina Ave., SE		Amount of Each Disbursement this Period 2000.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising	Transaction ID : D240-000120160023
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4650.09
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. Sumner360</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 811 North Carolina Ave., SE		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D241-000120160024</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sumner360</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 811 North Carolina Ave., SE		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D242-000120160025</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address P. O. Box 1800		Amount of Each Disbursement this Period 14.00 <b>Transaction ID : D260-000031480029</b>
City Saint Paul State MN Zip Code 55101	Purpose of Disbursement Bank fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4014.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2013
Mailing Address P. O. Box 1800		Amount of Each Disbursement this Period 14.00
City Saint Paul	State MN	
Zip Code 55101	Purpose of Disbursement Bank fee	Transaction ID : D261-000031480030
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address P. O. Box 1800		Amount of Each Disbursement this Period 14.00
City Saint Paul	State MN	
Zip Code 55101	Purpose of Disbursement Bank fee	Transaction ID : D262-000031480031
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 777 E. Wisconsin Ave		Amount of Each Disbursement this Period 974.46
City Milwaukee	State WI	
Zip Code 53202	Purpose of Disbursement w/h	Transaction ID : D274-000052220265
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1002.46
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 41		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 777 E. Wisconsin Ave		Amount of Each Disbursement this Period 424.64 <b>Transaction ID : D275-000052220267</b>
City Milwaukee	State WI Zip Code 53202	
Purpose of Disbursement w/h	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 711.27 <b>Transaction ID : D298-000077140216</b>
City Saint Louis	State MO Zip Code 63179	
Purpose of Disbursement Credit card payment	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Microsoft</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address One Microsoft Way		Amount of Each Disbursement this Period 231.21 <b>Transaction ID : D2-000128040001</b>
City Redmond	State WA Zip Code 98052	
Purpose of Disbursement Computer software	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1135.91
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. US Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 17345 Civic Drive		Amount of Each Disbursement this Period 276.00
City Brookfield	State WI	
Zip Code 53045	Purpose of Disbursement Stamps	Transaction ID : D7-000038510044
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. web.com</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 303 Peach Tree Suite 500		Amount of Each Disbursement this Period 72.90
City Atlanta	State GA	
Zip Code 30303	Purpose of Disbursement Website	Transaction ID : D8-000082720133
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 25.00
City Saint Louis	State MO	
Zip Code 63179	Purpose of Disbursement Bank fee	Transaction ID : D299-000077140217
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	25.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 396.41
City Saint Louis	State MO	
Zip Code 63179	Purpose of Disbursement Credit card payment	Transaction ID : D300-000077140218
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Public Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 1643 Arcadian Avenue		Amount of Each Disbursement this Period 210.00
City Waukesha	State WI	
Zip Code 53186	Purpose of Disbursement Storage Unit	Transaction ID : D4-000052240232
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 13425 Watertown Plank Rd.		Amount of Each Disbursement this Period 5.60
City Elm Grove	State WI	
Zip Code 53122	Purpose of Disbursement Postage	Transaction ID : D6-000117380004
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	396.41
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. web.com</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 303 Peach Tree Suite 500		Amount of Each Disbursement this Period 72.90
City Atlanta	State GA Zip Code 30303	
Purpose of Disbursement Website	Candidate Name	Transaction ID : D8-000082720134
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) <b>B. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 25.00
City Saint Louis	State MO Zip Code 63179	
Purpose of Disbursement Bank fee	Candidate Name	Transaction ID : D301-000077140219
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 1928.84
City Saint Louis	State MO Zip Code 63179	
Purpose of Disbursement Credit Card Payment	Candidate Name	Transaction ID : D302-000077140220
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1953.84
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 829 N. Mayfair Road.		Amount of Each Disbursement this Period 68.51
City Wauwatosa	State WI	
Zip Code 53226	Purpose of Disbursement Copying	Transaction ID : D1-000116270019
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Murphy's Irish Pub</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 713 King St.		Amount of Each Disbursement this Period 1196.56
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraiser room rental/ food and bev	Transaction ID : D4-000128720001
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Public Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 1643 Arcadian Avenue		Amount of Each Disbursement this Period 210.00
City Waukesha	State WI	
Zip Code 53186	Purpose of Disbursement Storage Unit	Transaction ID : D5-000052240233
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. US Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 13425 Watertown Plank Rd.		Amount of Each Disbursement this Period 278.51
City Elm Grove State WI Zip Code 53122	Purpose of Disbursement Stamps/ postage	
Candidate Name	Category/ Type	<b>Transaction ID : D6-000117380005</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Credit Card Item

Full Name (Last, First, Middle Initial) <b>B. web.com</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 303 Peach Tree Suite 500		Amount of Each Disbursement this Period 72.90
City Atlanta State GA Zip Code 30303	Purpose of Disbursement Website	
Candidate Name	Category/ Type	<b>Transaction ID : D7-000082720135</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Credit Card Item

Full Name (Last, First, Middle Initial) <b>C. US Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address P. O. Box 790408		Amount of Each Disbursement this Period 25.00
City Saint Louis State MO Zip Code 63179	Purpose of Disbursement Bank fee	
Candidate Name	Category/ Type	<b>Transaction ID : D303-000077140221</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	25.00
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. UniSource Direct</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address PO Box 82		Amount of Each Disbursement this Period 7034.27
City Watertown	State WI	
Zip Code 53094	Purpose of Disbursement Fundraising mailing	<b>Transaction ID : D316-000092200028</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Victory Enterprises</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 5200 S.W. 30th St., Ste. 7		Amount of Each Disbursement this Period 105.00
City Davenport	State IA	
Zip Code 52802	Purpose of Disbursement Website Hosting	<b>Transaction ID : D320-000118430009</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WISCONSIN DEPT OF REVENUE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address PO BOX 8902		Amount of Each Disbursement this Period 284.93
City Madison	State WI	
Zip Code 53708	Purpose of Disbursement Q3 w/h	<b>Transaction ID : D336-000052430203</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7424.20
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Sensenbrenner Committee**

Full Name (Last, First, Middle Initial) <b>A. Alec Zimmerman</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1241 E. Meinecke Ave.		Amount of Each Disbursement this Period 153.91 <b>Transaction ID : D348-000120430021</b>
City Milwaukee	State WI	
Zip Code 53212	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Alec Zimmerman</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 1241 E. Meinecke Ave.		Amount of Each Disbursement this Period 153.93 <b>Transaction ID : D349-000120430022</b>
City Milwaukee	State WI	
Zip Code 53212	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Alec Zimmerman</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 1241 E. Meinecke Ave.		Amount of Each Disbursement this Period 153.92 <b>Transaction ID : D350-000120430023</b>
City Milwaukee	State WI	
Zip Code 53212	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	461.76
<b>TOTAL</b> This Period (last page this line number only).....	25649.22