

FEC FORM 3P

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

SCOTT WALKER INC

ADDRESS (number and street)

PO BOX 620590

Check if different than previously reported. (ACC)

MIDDLETON

CITY

WI

STATE

53562

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00580480

3. THIS REPORT IS FOR Primary

or General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)
- October 15 (Q3)
- July 15 (Q2)
- January 31 Year-End Report (YE)
- Feb 20 (M2)
- May 20 (M5)
- Aug 20 (M8)
- Nov 20 (M11)
- Mar 20 (M3)
- Jun 20 (M6)
- Sep 20 (M9)
- Dec 20 (M12)
- Apr 20 (M4)
- Jul 20 (M7)
- Oct 20 (M10)
- Jan 31 (YE)

Thirtieth day report following the General Election

on MM/DD/YYYY

Twelfth day report preceding election

on MM/DD/YYYY in the State of

Is this Report an Amendment?

yes

no

5. Covering Period

MM/DD/YYYY 07/01/2016

through

MM/DD/YYYY 07/31/2016

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

KATE LIND

Signature of Treasurer

KATE LIND

[Electronically Filed]

Date

MM/DD/YYYY 08/19/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

Write or Type Committee Name

SCOTT WALKER INC

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

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	<input type="text" value="78951.97"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	<input type="text" value="116129.47"/>
8. SUBTOTAL (Lines 6 and 7)	<input type="text" value="195081.44"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	<input type="text" value="76588.24"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="118493.20"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="672556.15"/>
13. EXPENDITURES SUBJECT TO LIMITATION	<input type="text" value="280477.50"/>

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	<input type="text" value="7859061.65"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="8157527.01"/>

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Receipts

NAME OF COMMITTEE (in Full)

SCOTT WALKER INC

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2016

To:

MM / DD / YYYY
07 / 31 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	28491.00	5330322.54
(ii) unitemized	18189.00	2926547.11
(iii) Total contributions	46680.00	8256869.65
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	3000.00	56100.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	49680.00	8312969.65
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	20.03	64746.22
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	20.03	64746.22
21. OTHER RECEIPTS (Dividends, Interest, etc.)	66429.44	416958.56
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	116129.47	8794674.43

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

SCOTT WALKER INC

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2016

To:

MM / DD / YYYY
07 / 31 / 2016

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	76513.24	8222273.23
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	75.00	448908.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	75.00	453908.00
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	76588.24	8676181.23

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC FORM 3P,
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00580480

SCOTT WALKER INC

ADDRESS (number and street) PO BOX 620590

MIDDLETON

CITY

WI

STATE

53562

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

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

Mailing Address 312 FOREST DR SE

City State Zip Code
CEDAR RAPIDS IA 52403

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
316.00

Transaction ID : SA17A.147644

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PAT AINLEY

Mailing Address PO BOX 3908

City State Zip Code
CRESTLINE CA 92325

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Transaction ID : SA17A.147293

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HAROLD ALLEN

Mailing Address 713 WADEFIELD CT

City State Zip Code
EL PASO TX 79922

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Transaction ID : SA17A.147519

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 250.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JONATHAN ARNOLD

Mailing Address **3409 SETHWARNER PL**

City **GLEN ALLEN** State **VA** Zip Code **23059**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147972

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HENRY ARRINGTON

Mailing Address **301 BELLA DR**

City **METAIRIE** State **LA** Zip Code **70005-4123**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.147275

Date of Receipt
 M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WALTER BAHLER

Mailing Address **5927 S CREEKSIDE CT**

City **REMINGTON** State **IN** Zip Code **47977**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
475.00

Transaction ID : SA17A.147296

Date of Receipt
 M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
35.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **135.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JAMES M BECK

Mailing Address 312 FAIRWAY DR

City State Zip Code
COLUMBUS WI 53925

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

Name of Employer Occupation
DRS. BECK & BECK DENTIST

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Transaction ID : SA17A.147757

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN BECK

Mailing Address 4107 W. RUDELLA RD.

City State Zip Code
MEQUON WI 53092

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17A.147801

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JAMES D BELL

Mailing Address 3900 W LE MONT BLVD

City State Zip Code
MEQUON WI 53092

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

Name of Employer Occupation
RW BAIRD INVESTMENT BANKER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Transaction ID : SA17A.147756

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
500.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 850.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MENACHEM BERGER

Mailing Address **6244 N CENTRAL PARK AVENUE**

City **CHICAGO** State **IL** Zip Code **60659**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Transaction ID : SA17A.147135

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN BETTENHAUSEN

Mailing Address **32 ACKMAN LN**

City **COATESVILLE** State **PA** Zip Code **19320**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147823

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ALLEN M BIEVER

Mailing Address **147 E BEUTEL RD**

City **PORT WASHINGTON** State **WI** Zip Code **53074**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Transaction ID : SA17A.147775

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **2850.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JEAN BORLAND

Mailing Address **403 APPLERIDGE CT**

City **GIBSONIA** State **PA** Zip Code **15044**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **700.00**

Transaction ID : SA17A.147939

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANGELA BOWE

Mailing Address **1245 CONTINENTAL DRIVE**

City **EAU CLAIRE** State **WI** Zip Code **53701**

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

Name of Employer **PARK RIDGE DISTRIBUTING** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1250.00**

Transaction ID : SA17A.147126

Date of Receipt
 M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Receipt this Period
1250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. DUANE BURTON

Mailing Address **23669 E OTERO DRIVE**

City **AURORA** State **CO** Zip Code **80016**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Transaction ID : SA17A.147845

Date of Receipt
 M M / D D / Y Y Y Y
07 / 28 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **1550.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
BARBARA BUSSE

Mailing Address 728 TWO RIVERS DR

City State Zip Code
MUKWONAGO WI 53149

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147920

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
KAREN M BUTZ

Mailing Address 1120 W DECORAH RD

City State Zip Code
WEST BEND WI 53095

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147752

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
STEVEN BYSTED

Mailing Address 3461 POPLAR LANE

City State Zip Code
JANESVILLE WI 53545

FEC ID number of contributing federal political committee.

Name of Employer Occupation
OTT SCHWEITZER DISTRIBUTION CO OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147129

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
C. CABRERA

Mailing Address **7821 BRIARWOOD DRIVE**

City State Zip Code
EVANSVILLE IN 47715

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17A.147966

Date of Receipt
M M / D D / Y Y Y Y
07 29 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
75.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN W CAMPBELL

Mailing Address **526 REGENTVIEW DR**

City State Zip Code
HOUSTON TX 77079

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

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1010.00

Transaction ID : SA17A.148002

Date of Receipt
M M / D D / Y Y Y Y
07 13 2016

Amount of Each Receipt this Period
10.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MRS. DORIS A CARLSON

Mailing Address **W4202 OLD B ROAD**

City State Zip Code
WEST SALEM WI 54669

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147602

Date of Receipt
M M / D D / Y Y Y Y
07 14 2016

Amount of Each Receipt this Period
50.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **135.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DAVID W CARSTENS

Mailing Address 1221 TENNY AVE

City State Zip Code
WAUKESHA WI 53186

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.147744

Date of Receipt
MM / DD / YYYY
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VERA CASTO

Mailing Address 33116 LAKE FOREST CT

City State Zip Code
NILES MI 49120

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.147967

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STEVEN CHORKAWY

Mailing Address 1371 RUSSELL AVENUE

City State Zip Code
LINCOLN PARK MI 48146

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147976

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
50.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 250.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

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<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)
SCOTT WALKER INC

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

Mailing Address 7002 YATES FORD ROAD

City State Zip Code
MANASSAS VA 20111

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
240.00

Transaction ID : SA17A.147141

Date of Receipt

M M / D D / Y Y Y Y
07 04 2016

Amount of Each Receipt this Period

10.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN CHURCH

Mailing Address 7002 YATES FORD ROAD

City State Zip Code
MANASSAS VA 20111

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147158

Date of Receipt

M M / D D / Y Y Y Y
07 11 2016

Amount of Each Receipt this Period

10.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN CHURCH

Mailing Address 7002 YATES FORD ROAD

City State Zip Code
MANASSAS VA 20111

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.00

Transaction ID : SA17A.147674

Date of Receipt

M M / D D / Y Y Y Y
07 18 2016

Amount of Each Receipt this Period

10.00

Memo Item

Subtotal Of Receipts This Page (optional)..... 30.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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<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)
SCOTT WALKER INC

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

Mailing Address 7002 YATES FORD ROAD

City	State	Zip Code
MANASSAS	VA	20111

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147781

Date of Receipt
 / /

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
WALTER CLUER

Mailing Address 301 MISSION AVE

City	State	Zip Code
OCEANSIDE	CA	92054

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ADAPTECH	BUSINESS OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147294

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
J. LEWIS COOPER, JR.

Mailing Address 743 LOCHMOOR BLVD.

City	State	Zip Code
GROSSE POINTE WOODS	MI	48236

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147466

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
WILLIAM CORRIGAN

Mailing Address 1664 STRASBOURG

City	State	Zip Code
TRAVERSE CITY	MI	49696

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147378

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2016			

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
MONTE CRAIG

Mailing Address 59 WARRINGTON CT

City	State	Zip Code
LAKE BLUFF	IL	60044

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147537

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			14			2016			

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
SHARON CRIMMEL

Mailing Address 6955 CARLISLE COURT, AP

City	State	Zip Code
NAPLES	FL	34109

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147671

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			18			2016			

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
BARBARA C DIEHL

Mailing Address 13210 OAK RIDGE TRAIL,

City State Zip Code
PALOS HEIGHTS IL 60463

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

Name of Employer Occupation
SELF-EMPLOYED INVESTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Transaction ID : SA17A.147324

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAM DOLAN

Mailing Address 1040 E. OSBORN RD.

City State Zip Code
PHOENIX AZ 85014

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Transaction ID : SA17A.147675

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BOYD DRENNAN

Mailing Address 1180 BRIDLE DRIVE

City State Zip Code
RICHLAND WA 99352

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.147942

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
200.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 350.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
STEVEN FRANK

Mailing Address 3969 CARIBOU ROAD

City	State	Zip Code
VERONA	WI	53593

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FRANK BEER DISTRIBUTOR	OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147133

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			01			2016			

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN GLEESON

Mailing Address 412 N HICKORY AV

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60004

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147940

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			29			2016			

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
PHOEBE J GOFF

Mailing Address W2960 LA FOLLETTE RD

City	State	Zip Code
NEOSHO	WI	53059

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147777

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
07			25			2016			

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 21 / 59

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
TODD GUTSCHOW

Mailing Address **361 WOODLAKE COURT**

City State Zip Code
KOHLER WI 53044

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

Name of Employer Occupation
LARRY'S DISTRIBUTING CO., INC. VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1285.00

Transaction ID : SA17A.147127

Date of Receipt

07 / 01 / 2016

Amount of Each Receipt this Period

1250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCOTT HAMILTON

Mailing Address **7085 TILGHMAN ISLAND RD.**

City State Zip Code
SHERWOOD MD 21665

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.00

Transaction ID : SA17A.147502

Date of Receipt

07 / 13 / 2016

Amount of Each Receipt this Period

50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SHARON HAYHOE

Mailing Address **1851 PARK SKYLINE RD**

City State Zip Code
SANTA ANA CA 92705

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
425.00

Transaction ID : SA17A.147364

Date of Receipt

07 / 13 / 2016

Amount of Each Receipt this Period

25.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **1325.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DANNY HAYNES

Mailing Address 11015 MAIN ST

City State Zip Code
ROSCOE IL 61073

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147711

Date of Receipt
M M / D D / Y Y Y Y
07 / 22 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MARCIA K. HERRING

Mailing Address 1498 FURNESS PARKWAY

City State Zip Code
ST. PAUL MN 55119

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
209.00

Transaction ID : SA17A.147155

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2016

Amount of Each Receipt this Period
106.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN HERSON

Mailing Address 146 WHITNEY HILL ROAD

City State Zip Code
TUNBRIDGE VT 05077

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
655.00

Transaction ID : SA17A.147305

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 406.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MARY HICKEY

Mailing Address 7707 FAIR OAKS PKWY

City State Zip Code
FAIR OAKS RAN TX 78015

FEC ID number of contributing federal political committee.

Name of Employer Occupation
ALAMO CITY REAL ESTATE SERVICE REAL ESTATE

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147928

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
LARRY W HINES

Mailing Address 335 W CIRCLE DR

City State Zip Code
MUSKEGON MI 49445

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147996

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
NANCY JONES

Mailing Address 10607 N. HIDDEN CREEK CT

City State Zip Code
MEQUON WI 53092

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147542

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
YEHIEL KALISH

Mailing Address 3020 W FARGO AVENUE

City State Zip Code
CHICAGO IL 60645

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147162

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
KENNETH R KARAN

Mailing Address 6730 N ATWAHL DR

City State Zip Code
MILWAUKEE WI 53209

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KENCO LABEL & TAG CO, LLC MANAGING MEMBER

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147746

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBERT J KELLY

Mailing Address 5901 COVINGTON CT

City State Zip Code
MINNETONKA MN 55345

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147804

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
RONALD KLIMISCH

Mailing Address 402 PINE ISLAND LANE

City State Zip Code
SCHOFIELD WI 54476

FEC ID number of contributing federal political committee.

Name of Employer Occupation
WAYAN SUPPLY CO PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.147686

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
BERNARD KOETHER

Mailing Address 757 SE 17TH ST
#

City State Zip Code
FORT LAUDERDA FL 33316

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.147580

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2016

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
STEVEN KOHNER

Mailing Address 4980 W 6TH STREET

City State Zip Code
WINONA MN 55987

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KOHNER MATERIAL OWNER

Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Transaction ID : SA17A.147851

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
THOMAS KOLOCHESKI

Mailing Address **3831 WILLOW TREE LANE**

City State Zip Code
DE PERE WI 54115

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

Name of Employer Occupation
KAY BEER DISTRIBUTORS DISTRIBUTOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Transaction ID : SA17A.147124

Date of Receipt
M M / D D / Y Y Y Y
07 01 2016

Amount of Each Receipt this Period
1250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANNE LANG

Mailing Address **100 E BELLEVUE #25F**

City State Zip Code
CHICAGO IL 60611

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

Name of Employer Occupation
FOLEY & LARDNER COMPUTING CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Transaction ID : SA17A.147369

Date of Receipt
M M / D D / Y Y Y Y
07 13 2016

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LISA S LAUTZ

Mailing Address **7443 OAKHILL AVE**

City State Zip Code
WAUWATOSA WI 53213

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.147831

Date of Receipt
M M / D D / Y Y Y Y
07 27 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **1600.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 27 / 59

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
HELEN D LEFOR

Mailing Address 80 GOLD ST APT 3J

City State Zip Code
NEW YORK NY 10038

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147145

Date of Receipt

/ /

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN LEIGH

Mailing Address 2926 LAUREL PARK HWY.

City State Zip Code
HENDERSONVILLE NC 28739

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147383

Date of Receipt

/ /

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
GEORGE LONGINO

Mailing Address 4636 N VERSAILLES AV

City State Zip Code
DALLAS TX 75209

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147415

Date of Receipt

/ /

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
W. W MARSLENDER

Mailing Address 3608 RANLO DR

City State Zip Code
RALEIGH NC 27612

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

Name of Employer Occupation
AG EDWARDS VP

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17A.147948

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NICHOLAS MAY

Mailing Address 3102 OLD GATE ROAD, APT-A

City State Zip Code
MADISON WI 53704

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

Name of Employer Occupation
RDCI/RIS CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147272

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DOUGLAS W MCGEE

Mailing Address 3268 LAKE FOREST PARK RD

City State Zip Code
STURGEON BAY WI 54235

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

Name of Employer Occupation
SELF-EMPLOYED PIANO SERV

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.147959

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 400.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JACQUELINE Y MEESE

Mailing Address PO BOX 368

City WESTON State WV Zip Code 26452

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Transaction ID : SA17A.147955

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOSEPH MILLER

Mailing Address 6617 E ORCHARD PL

City CENTENNIAL State CO Zip Code 80111

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Transaction ID : SA17A.147870

Date of Receipt
MM / DD / YYYY
07 / 28 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KEITH MOORE

Mailing Address 2600 W 7TH ST
APT 2746

City FORT WORTH State TX Zip Code 76107

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

Name of Employer 4FRONT ENGINEERED SOLUTIONS, INC. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
575.00

Transaction ID : SA17A.147997

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
250.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 400.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 30 / 59

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MARIAN E MOYER

Mailing Address 6322 PILGRIM RD

City MADISON State WI Zip Code 53711

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147838

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN N. COLLINS

Mailing Address 338 S. BAY SHORE BLVD.

City GILBERT State AZ Zip Code 85233

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147529

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2016

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
STEPHAN NEWHOUSE

Mailing Address 600 COCONUT PALM ROAD

City VERO BEACH State FL Zip Code 32963

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147140

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
BEVERLY H OASHGAR

Mailing Address 306 N SEGOE RD

City State Zip Code
MADISON WI 53705

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.147687

Date of Receipt

M M / D D / Y Y Y Y
07 18 2016

Amount of Each Receipt this Period

500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RAMON E OLSON

Mailing Address N50W23076 BETKER DR

City State Zip Code
PEWAUKEE WI 53072

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Transaction ID : SA17A.147741

Date of Receipt

M M / D D / Y Y Y Y
07 25 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN PEARSON

Mailing Address 51 PINE ST

City State Zip Code
RYE NH 03870

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
575.00

Transaction ID : SA17A.147917

Date of Receipt

M M / D D / Y Y Y Y
07 29 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

200.00

Memo Item

Subtotal Of Receipts This Page (optional)..... 1250.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

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

Mailing Address 4442 VEREDA LUNA LLE

City	State	Zip Code
SAN DIEGO	CA	92130

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 355.00

Transaction ID : SA17A.147425

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	6

Amount of Each Receipt this Period

_____ 35.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ANTHONY POGODZINSKI

Mailing Address 9609 MANITOU PK DR

City	State	Zip Code
MINOCQUA	WI	54548

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 450.00

Transaction ID : SA17A.147245

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	6

Amount of Each Receipt this Period

_____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HARVEY POLLACK

Mailing Address 9855 W. HAWTHORNE RD

City	State	Zip Code
MEQUON	WI	53097

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

Name of Employer	Occupation
LAND TITLE SERVICES INC	PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 950.00

Transaction ID : SA17A.147281

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	6

Amount of Each Receipt this Period

_____ 250.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ _____ 385.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
PATRICIA A POTTRATZ

Mailing Address **N3723 CLEVELAND AVE**

City **MARINETTE** State **WI** Zip Code **54143**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
470.00

Transaction ID : SA17A.147620

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LORENE PRATHER

Mailing Address **3763 MISSOURI ROAD**

City **MARIANNA** State **FL** Zip Code **32446**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17A.147501

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WILLIAM RAATHS

Mailing Address **1234 LAKESHORE DR**

City **MENASHA** State **WI** Zip Code **54952**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.147785

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
200.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **275.00**

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
ROY REIMAN

Mailing Address 125 WEST WISCONSIN AVENUE, SUITE 2

City State Zip Code
PEWAUKEE WI 53072

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.147689

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2016

Amount of Each Receipt this Period
400.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHN D REMICK

Mailing Address 3232 FOX HOLLOW COURT SW

City State Zip Code
ROCHESTER MN 55902

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Transaction ID : SA17A.147841

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GWEN A ROGERS

Mailing Address 8620 NW 13TH STREET
#160

City State Zip Code
GAINESVILLE FL 32653

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Transaction ID : SA17A.147221

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
10.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 910.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
PETER RUUD

Mailing Address 18605 BONNIE LANE

City State Zip Code
BROOKFIELD WI 53045

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Transaction ID : SA17A.147290

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DARLENE SANCHEZ

Mailing Address 239 E 9585 SOUTH

City State Zip Code
SANDY UT 84070

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
575.00

Transaction ID : SA17A.147952

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN SODERBERG

Mailing Address 550 PINE RIDGE CT

City State Zip Code
NEW RICHMOND WI 54017

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

Name of Employer Occupation
FIRST NATIONAL COMMUNITY BAN CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Transaction ID : SA17A.147849

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
300.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 450.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
CAROLYN STEINER

Mailing Address 901 E CLOVER

City State Zip Code
WITHEE WI 54498

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Transaction ID : SA17A.147843

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SOLOMON STEINER

Mailing Address 24 OLD WAGON ROAD

City State Zip Code
MOUNT KISCO NY 10549

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Transaction ID : SA17A.147486

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ALBERT W STEWART

Mailing Address 2528 MONTGOMERY AVENUE SW

City State Zip Code
ROANOKE VA 24015

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.147964

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 250.00

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
DOUGLAS E SUKUP

Mailing Address 1008 S 34TH ST

City State Zip Code
MILWAUKEE WI 53215

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Transaction ID : SA17A.147779

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 2421-B HUNTINGTON LN

City State Zip Code
REDONDO BEACH CA 90278

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.147548

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2016

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DEBRA TOWNS

Mailing Address 7930 N EAGLE RD

City State Zip Code
JANESVILLE WI 53548

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

Name of Employer Occupation
UNIVERSITY OF WISCONSIN PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Transaction ID : SA17A.147773

Date of Receipt
M M / D D / Y Y Y Y
07 / 25 / 2016

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period
200.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 800.00

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
MARY TRAEGER

Mailing Address 1003 CHARLES ST

City	State	Zip Code
WATERTOWN	WI	53094

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147553

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2016

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
DIANE WAGNER

Mailing Address 26638 SE 17TH PL

City	State	Zip Code
SAMMAMISH	WA	98075

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147203

Date of Receipt

M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
KIM WEIDMANN

Mailing Address N112W18025 MEQUON RD

City	State	Zip Code
GERMANTOWN	WI	53022

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147577

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2016

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
KANE WEINER

Mailing Address **3448 LOCKE LANE**

City	State	Zip Code
HOUSTON	TX	77027

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147933

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	6

PRIMARY 2016 DEBT RETIREMENT

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
STEVEN WHEELER

Mailing Address **4869 HIGHWOOD CIRCLE**

City	State	Zip Code
MIDDLETON	WI	53562

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FRANK BEER DISTRIBUTORS, INC.	INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147131

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
JIM WHITE

Mailing Address **1815 PTARMIGAN TRL**

City	State	Zip Code
ESTES PARK	CO	80517

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Transaction ID : SA17A.147175

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	6

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
JOSEPH WILHELM

Mailing Address **884 PEBBLEBROOK LN**

City	State	Zip Code
EAST LANSING	MI	48823

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
..... 355.00

Transaction ID : SA17A.147286

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
..... 50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DENISE WISEMAN

Mailing Address **9810 STATE HIGHWAY 220**

City	State	Zip Code
CASPER	WY	82604

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
..... 1900.00

Transaction ID : SA17A.147409

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2016

Amount of Each Receipt this Period
..... 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DOUGLAS R ZASTROW

Mailing Address **3023 N 11TH STREET**

City	State	Zip Code
WAUSAU	WI	54403

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

Name of Employer	Occupation
ZASTROW THE BEER MAN, INC	VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
..... 1250.00

Transaction ID : SA17A.147122

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Receipt this Period
..... 1250.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **1400.00**

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

SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
GARY ZIEGELBAUER

Mailing Address **PO BOX 28375**

City **GREEN BAY** State **WI** Zip Code **54324**

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

Name of Employer **TRIANGLE DISTRIBUTING CO.** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Transaction ID : SA17A.147120

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2016

Amount of Each Receipt this Period
1250.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **1250.00**

Total This Period (last page this line number only).....▶ **28491.00**

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial)
CITIZENS FOR DARIN LAHOOD

Mailing Address **PO BOX 10043**

City **PEORIA** State **IL** Zip Code **61612**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Transaction ID : SA17C.147636

Date of Receipt
 M M / D D / Y Y Y Y
07 / 15 / 2016

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LAHOOD FOR CONGRESS

Mailing Address **P.O. BOX 10735**

City **PEORIA** State **IL** Zip Code **61612**

FEC ID number of contributing federal political committee. **C C00575050**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **2000.00**

Transaction ID : SA17C.147638

Date of Receipt
 M M / D D / Y Y Y Y
07 / 15 / 2016

Amount of Each Receipt this Period
2000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional)..... **3000.00**

Total This Period (last page this line number only)..... **3000.00**

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. ASPECT CONSULTING LLC		Date of Disbursement MM / DD / YYYY 07 / 12 / 2016
Mailing Address 8401 EXCELSIOR DRIVE #103		Transaction ID : SB23.147113
City MADISON	State WI	
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 101	Amount of Each Disbursement this Period 5042.94
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BKZ CONSULTING INC.		Date of Disbursement MM / DD / YYYY 07 / 12 / 2016
Mailing Address PO BOX 577832		Transaction ID : SB23.147103
City CHICAGO	State IL	
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 101	Amount of Each Disbursement this Period 10000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BMO HARRIS BANK		Date of Disbursement MM / DD / YYYY 07 / 14 / 2016
Mailing Address 1 W MAIN STREET		Transaction ID : SB23.147115
City MADISON	State WI	
Purpose of Disbursement BANK FEES	Category/ Type 101	Amount of Each Disbursement this Period 170.65
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 15213.59

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. FLS CONNECT LLC		Date of Disbursement MM / DD / YYYY 07 / 12 / 2016
Mailing Address 7300 HUDSON BLVD #270		Transaction ID : SB23.147104
City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period 25000.00	
Purpose of Disbursement TELEMARKETING AND DATA	Category/Type 101	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. INFORELIANCE		Date of Disbursement MM / DD / YYYY 07 / 12 / 2016
Mailing Address LEGATO RD		Transaction ID : SB23.147105
City FAIRFAX State VA Zip Code 22033	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement TECHNICAL SERVICES	Category/Type 101	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ISTREAM FINANCIAL SERVICES		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address 13555 BISHOPS COURT		Transaction ID : SB23.147110
City BROOKFIELD State WI Zip Code 53005	Amount of Each Disbursement this Period 54.61	
Purpose of Disbursement BANK FEES	Category/Type 101	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 30054.61

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. JONES DAY		Date of Disbursement MM / DD / YYYY 07 / 12 / 2016
Mailing Address PO BOX 7805, BEN FRANKLIN STATION		Transaction ID : SB23.147106
City WASHINGTON	State DC	
Purpose of Disbursement LEGAL CONSULTING	Zip Code 20044	Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/ Type 101	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS LLC		Date of Disbursement MM / DD / YYYY 07 / 12 / 2016
Mailing Address 138 CONANT STREET 2ND FLOOR		Transaction ID : SB23.147107
City BEVERLY	State MA	
Purpose of Disbursement COMPLIANCE SOFTWARE	Zip Code 01915	Amount of Each Disbursement this Period 10000.00
Candidate Name	Category/ Type 101	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SCM ASSOCIATES INC.		Date of Disbursement MM / DD / YYYY 07 / 13 / 2016
Mailing Address PO BOX 254		Transaction ID : SB23.147109
City DUBLIN	State NH	
Purpose of Disbursement DIRECT MAIL PRINTING AND POSTAGE	Zip Code 03444	Amount of Each Disbursement this Period 13017.50
Candidate Name	Category/ Type 101	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 28017.50

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

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address 529 14TH STREET NW #350		Transaction ID : SB23.147111
City WASHINGTON	State DC	
Purpose of Disbursement MERCHANT FEES	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="30.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. STRIPE		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 529 14TH STREET NW #350		Transaction ID : SB23.147116
City WASHINGTON	State DC	
Purpose of Disbursement MERCHANT FEES	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="15.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 07 / 20 / 2016
Mailing Address 529 14TH STREET NW #350		Transaction ID : SB23.147118
City WASHINGTON	State DC	
Purpose of Disbursement MERCHANT FEES	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="1182.54"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional).....

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

SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. THE CHAMPION GROUP		Date of Disbursement MM / DD / YYYY 07 / 12 / 2016
Mailing Address PO BOX 1651		Transaction ID : SB23.147114
City MADISON State WI Zip Code 53701	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement STRATEGY CONSULTING	Category/Type 101	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2000.00

Total This Period (last page this line number only)..... 76513.24

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

Full Name (Last, First, Middle Initial) A. WILLIAM HALLAHAN		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address PO BOX 515		Transaction ID : SB28A.147117
City BRADFORD	State NH	
Purpose of Disbursement RETURNED CONTRIBUTION	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 25.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DAVID OLSEN		Date of Disbursement MM / DD / YYYY 07 / 08 / 2016
Mailing Address P.O. BOX 80307		Transaction ID : SB28A.147112
City SIMPSONVILLE	State SC	
Purpose of Disbursement RETURNED CONTRIBUTION	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Transaction ID :
City	State	
Purpose of Disbursement	<input type="checkbox"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 75.00

Total This Period (last page this line number only)..... 75.00

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ACS SOUND & LIGHTING

Nature of Debt (Purpose):
 EVENT STAGING EXPENSE

Mailing Address 110 LOTT COURT

City State Zip Code
 WEST COLUMBIA SC 29169

Outstanding Balance Beginning This Period

11816.11

Transaction ID : SD12.137408

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11816.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BKZ CONSULTING INC.

Nature of Debt (Purpose):
 FUNDRAISING CONSULTING

Mailing Address PO BOX 577832

City State Zip Code
 CHICAGO IL 60657

Outstanding Balance Beginning This Period

10000.00

Transaction ID : SD12.137414

Amount Incurred This Period

0.00

Payment This Period

10000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COMMUNICATIONS CORPORATION OF AMERICA

Nature of Debt (Purpose):
 DIRECT MAIL PRINTING AND POSTAGE

Mailing Address 13195 FREEDOM WAY

City State Zip Code
 BOSTON VA 22713

Outstanding Balance Beginning This Period

27421.95

Transaction ID : SD12.137416

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

27421.95

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

SCHEDULE D-P

DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DRUCKER LAWHON LLP

Nature of Debt (Purpose):
FUNDRAISING CONSULTING

Mailing Address **317 15TH STREET NE**

City State Zip Code
WASHINGTON DC 20002

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137419**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FASTLY INC.

Nature of Debt (Purpose):
DIGITAL CONSULTING

Mailing Address **PO BOX 78266**

City State Zip Code
SAN FRANCISCO CA 94107

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137420**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS CONNECT LLC

Nature of Debt (Purpose):
TELEMARKETING AND DATA

Mailing Address **7300 HUDSON BLVD #270**

City State Zip Code
SAINT PAUL MN 55128

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137421**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
GROUND GAME STRATEGIES

Nature of Debt (Purpose):
 FIELD CONSULTING

Mailing Address 300 HICKORY LANE

City State Zip Code
 MAULDIN SC 29662

Outstanding Balance Beginning This Period

Transaction ID : SD12.137424

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
HARBINGER LLC

Nature of Debt (Purpose):
 EVENT CONSULTING

Mailing Address 1919 M STREET NW #200

City State Zip Code
 WASHINGTON DC 20036

Outstanding Balance Beginning This Period

Transaction ID : SD12.137425

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
INFORELIANCE

Nature of Debt (Purpose):
 TECHNICAL SERVICES

Mailing Address LEGATO RD

City State Zip Code
 FAIRFAX VA 22033

Outstanding Balance Beginning This Period

Transaction ID : SD12.141566

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
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SCHEDULE D-P DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JONES DAY

Nature of Debt (Purpose):
LEGAL CONSULTING

Mailing Address PO BOX 7805, BEN FRANKLIN STATION

City State Zip Code
WASHINGTON DC 20044

Outstanding Balance Beginning This Period

62290.75

Transaction ID : SD12.137430

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

57290.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JUST WIN STRATEGIES

Nature of Debt (Purpose):
FIELD CONSULTING

Mailing Address PO BOX 2561

City State Zip Code
ALEXANDRIA VA 22301

Outstanding Balance Beginning This Period

4955.42

Transaction ID : SD12.137431

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4955.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MASENG COMMUNICATIONS

Nature of Debt (Purpose):
COMMUNICATIONS CONSULTING

Mailing Address 11309 BAROQUE ROAD

City State Zip Code
SILVER SPRING MD 20901

Outstanding Balance Beginning This Period

22500.00

Transaction ID : SD12.4125

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22500.00

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MAVERICK FINANCE

Nature of Debt (Purpose):
FUNDRAISING CONSULTING

Mailing Address **403 N SECOND STREET, 2ND FL**

City State Zip Code
HARRISBURG PA 17101

Outstanding Balance Beginning This Period

Transaction ID : SD12.137442

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MMA EVENTS LLC

Nature of Debt (Purpose):
EVENT STAGING EXPENSE

Mailing Address **1851 SOUTH CLUB DRIVE**

City State Zip Code
HYATTSVILLE MD 20785

Outstanding Balance Beginning This Period

Transaction ID : SD12.4115

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NEW RIVER RESEARCH INSTITUTE LLC

Nature of Debt (Purpose):
DATA MANAGEMENT SERVICES

Mailing Address **2150 COUNTRY CLUB ROAD #221**

City State Zip Code
WINSTON-SALEM NC 27104

Outstanding Balance Beginning This Period

Transaction ID : SD12.137445

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
POLITICODE

Nature of Debt (Purpose):
WEB DEVELOPMENT

Mailing Address **3 CIRCLE DRIVE**

City State Zip Code
CARMEL IN 46032

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137448**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PROSPECT STRATEGIC COMMUNICATIONS LLC

Nature of Debt (Purpose):
COMMUNICATIONS CONSULTING

Mailing Address **PO BOX 17079**

City State Zip Code
ARLINGTON VA 22216

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137451**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RED CURVE SOLUTIONS LLC

Nature of Debt (Purpose):
COMPLIANCE SOFTWARE & DEVELOPMENT

Mailing Address **138 CONANT STREET**
2ND FLOOR

City State Zip Code
BEVERLY MA 01915

Outstanding Balance Beginning This Period

Transaction ID : **SD12.137452**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
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SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SCM ASSOCIATES INC.

Nature of Debt (Purpose):
 DIRECT MAIL PRINTING AND POSTAGE

Mailing Address PO BOX 254

City State Zip Code
 DUBLIN NH 03444

Outstanding Balance Beginning This Period

Transaction ID : SD12.137454

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SHARP POLITICS LLC

Nature of Debt (Purpose):
 VIDEO PRODUCTION SERVICES

Mailing Address PO BOX 25122

City State Zip Code
 ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

Transaction ID : SD12.137456

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SHIRLEY & BANISTER PUBLIC AFFAIRS

Nature of Debt (Purpose):
 COMMUNICATIONS CONSULTING

Mailing Address 122 S PATRICK STREET

City State Zip Code
 ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

Transaction ID : SD12.137457

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SNOW PHOTOGRAPHY

Nature of Debt (Purpose):
 PHOTOGRAPHY SERVICES

Mailing Address PO BOX 34763

City State Zip Code
 WASHINGTON DC 20043

Outstanding Balance Beginning This Period

Transaction ID : SD12.137458

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SUPERIOR STRATEGIES LLC

Nature of Debt (Purpose):
 FUNDRAISING CONSULTING

Mailing Address 717 KING STREET #205

City State Zip Code
 ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

Transaction ID : SD12.137459

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LUKENS COMPANY

Nature of Debt (Purpose):
 DIRECT MAIL PRINTING AND POSTAGE

Mailing Address 2800 SHIRLINGTON ROAD
 9TH FLOOR

City State Zip Code
 ARLINGTON VA 22206

Outstanding Balance Beginning This Period

Transaction ID : SD12.137460

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
SCOTT WALKER INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TUSK PRODUCTIONS LLC

Nature of Debt (Purpose):
FUNDRAISING CONSULTING

Mailing Address **38 LAKEWOOD DRIVE**

City State Zip Code
DENVILLE NJ 07834

Transaction ID : SD12.137465

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3838.28"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="672556.15"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only).....	<input type="text" value="672556.15"/>