

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Republican Party of Wisconsin

ADDRESS (number and street)

148 East Johnson Street

Check if different
than previously
reported. (ACC)

Madison

WI

53703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00074450

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer

Ruh, Kelly, , ,

Signature of Treasurer

Ruh, Kelly, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

MM / DD / YYYY
06 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2025		258366.74
(b) Cash on Hand at Beginning of Reporting Period.....	380982.76	
(c) Total Receipts (from Line 19)	237906.20	1288399.97
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	618888.96	1546766.71
7. Total Disbursements (from Line 31)	168170.71	1096048.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	450718.25	450718.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 06 / 01 / 2025

To:

 M M / D D / Y Y Y Y
 06 / 30 / 2025
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

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

20843.83

276092.62

(ii) Unitemized

29697.35

250580.91

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

50541.18

526673.53

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

50.00

9187.71

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

50591.18

535861.24

12. Transfers From Affiliated/Other

Party Committees.....

183113.30

375946.79

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

677.57

49994.37

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

2236.05

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

3524.15

324361.52

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

3524.15

324361.52

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

237906.20

1288399.97

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

234382.05

964038.45

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	668.42	57259.97
(ii) Non-Federal Share.....	3787.69	324473.24
(b) Other Federal Operating Expenditures	48876.04	389289.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	53332.15	771022.75
22. Transfers to Affiliated/Other Party Committees.....	26321.00	75036.08
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.04	0.04
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.04	0.04
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	88517.52	249989.59
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	88517.52	249989.59
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	168170.71	1096048.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	164383.02	771575.22

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	50591.18	535861.24
34. Total Contribution Refunds (from Line 28(d))	0.04	0.04
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50591.14	535861.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	49544.46	446549.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	677.57	49994.37
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48866.89	396555.14

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: F3XN
Transaction ID :

ALL PAYROLL AND RELATED BENEFITS APPEARING ON SCHEDULE H4 ARE FOR EMPLOYEES WHO
WORKED LESS THAN 25% OF THEIR TIME ON FEDERAL ELECTION ACTIVITY OR ACTIVITIES RELATED TO A
FEDERAL ELECTION.)

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. BALDUS, GEORGE, L., ,

Mailing Address 528 E NORPORT DRIVE

City
PORT WASHINGTONState
WIZip Code
53074-1170FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2025

Transaction ID : SA11A.1244058

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

B. BELONGIA, RICHARD, J., ,

Mailing Address 2813 12TH STREET

City
TWO RIVERSState
WIZip Code
54241-3311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2025

Transaction ID : SA11A.1243749

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. BERGANINI, DAVID, F., ,

Mailing Address 5314 WOODLAND DRIVE

City
WEST BENDState
WIZip Code
53095-8310FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2025

Transaction ID : SA11A.1243815

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

375.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. BERGANINI, DAVID, F., ,

Mailing Address 5314 WOODLAND DRIVE

City
WEST BENDState
WIZip Code
53095-8310FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2025

Transaction ID : SA11A.1244079

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. BLESER, HELEN, A., MRS,

Mailing Address 1804 30TH STREET

City
TWO RIVERSState
WIZip Code
54241-2020FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2025

Transaction ID : SA11A.1244159

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

C. BROWN, LINDA, L., ,

Mailing Address 109 SHATO LANE

City
MONONAState
WIZip Code
53716-3791FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2025

Transaction ID : SA11A.1243733

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. CAPORASO, MARSHA, J., ,

Mailing Address 6910 3RD AVENUE

City
KENOSHAState
WIZip Code
53143-5507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARATRON, INC.Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 09 / 2025

Transaction ID : SA11A.1243684

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

B. CLAIBORNE, WALTER, H., , III

Mailing Address 14217 CLAIRBORNE ROAD

City
BATCHELORState
LAZip Code
70715-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2025

Transaction ID : SA11A.1243793

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

C. DEHN, CLARA, M., ,

Mailing Address 944 N 25TH STREET

City
SHEBOYGANState
WIZip Code
53081-3703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2025

Transaction ID : SA11A.1244160

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

700.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. EWING, PEGGY, L., ,

Mailing Address BOX 999

City
JAMESVILLEState
WIZip Code
53547-0999FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 03 / 2025

Transaction ID : SA11A.1243265

Amount of Each Receipt this Period

600.00

☐ Memo Item
CONTRIBUTION

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

B. FAITH, DENNIS, A., ,

Mailing Address 433 WHITE OAK LANE

City
LAKE BARRINGTONState
ILZip Code
60010-6227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 03 / 2025

Transaction ID : SA11A.1243295

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

C. FALL, JOSEPH, H., MR., IV

Mailing Address 3716 TREMONT COURT

City
MEQUONState
WIZip Code
53092-6306FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 03 / 2025

Transaction ID : SA11A.1243279

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

1100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. FALL, JOSEPH, H., MR., IV

Mailing Address 3716 TREMONT COURT

City
MEQUONState
WIZip Code
53092-6306FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 09 / 2025

Transaction ID : SA11A.1243660

Amount of Each Receipt this Period

450.00

☐ Memo Item
CONTRIBUTION

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

B. GLOVER, JAMES, F., ,

Mailing Address PO BOX 218

City
JOHNSON CREEKState
WIZip Code
53038-0218FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2025

Transaction ID : SA11A.1244217

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. GOULD, THOMAS, J., ,

Mailing Address 10248 WESTPORT CIRCLE

City
MEQUONState
WIZip Code
53092-5739FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2025

Transaction ID : SA11A.1243404

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

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

1050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. GRANDINETTI, JOHN, , ,

Mailing Address 366 SHORE ROAD

City
STATEN ISLANDState
NYZip Code
10307-1551FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2025

Transaction ID : SA11A.1243270

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. GRANDINETTI, JOHN, , ,

Mailing Address 366 SHORE ROAD

City
STATEN ISLANDState
NYZip Code
10307-1551FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2025

Transaction ID : SA11A.1243907

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. HALL, JOHN, G., ,

Mailing Address 169 BEAVER HILL ROAD

City
NORTH WINDHAMState
CTZip Code
06256-1238FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2025

Transaction ID : SA11A.1243745

Amount of Each Receipt this Period

100.00

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

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. HORSTICK, DAVID, P., ,

Mailing Address N23 W27193 SHELLY LYNN DRIVE

City
PEWAUKEEState
WIZip Code
53072-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2025

Transaction ID : SA11A.1244013

Amount of Each Receipt this Period

400.00

☐ Memo Item
CONTRIBUTION

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

B. JAMISON, CRAIG, A., MR.,

Mailing Address 520 BOBS DRIVE

City
PLOVERState
WIZip Code
54467-2126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2025

Transaction ID : SA11A.1243325

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. KNUTSON, JUDITH, A., ,

Mailing Address 4207 PINECREST COURT

City
LA CROSSEState
WIZip Code
54601-8047FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2025

Transaction ID : SA11A.1243929

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. KNUTSON, JUDITH, A., ,

Mailing Address 4207 PINECREST COURT

City
LA CROSSEState
WIZip Code
54601-8047FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244240

Amount of Each Receipt this Period

90.00

☐ Memo Item
CONTRIBUTION

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

B. KRAMER, WILLIAM, A., ,

Mailing Address 2626 HOWELL STREET, 10TH FLOOR

City
DALLASState
TXZip Code
75204-4064FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REPUBLIC TITLE OF TEXASOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2025

Transaction ID : SA11A.1243930

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. LANG, GORDON, E., ,Mailing Address 301 E BEAUMONT AVENUE APT. 303
APT 303 APT 303City
WHITEFISH BAYState
WIZip Code
53217-2378FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2025

Transaction ID : SA11A.1243507

Amount of Each Receipt this Period

80.00

☐ Memo Item
CONTRIBUTION

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

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

1170.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. LANG, GORDON, E., ,Mailing Address 301 E BEAUMONT AVENUE APT. 303
APT 303 APT 303City
WHITEFISH BAYState
WIZip Code
53217-2378FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 20 / 2025

Transaction ID : SA11A.1243944

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. LEWKE, DAVID, W., ,

Mailing Address 1442 WHEELER ROAD, CONDO B

City
MADISONState
WIZip Code
53704-1466FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2025

Transaction ID : SA11A.1243306

Amount of Each Receipt this Period

58.00

☐ Memo Item
CONTRIBUTION

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

C. LEWKE, DAVID, W., ,

Mailing Address 1442 WHEELER ROAD, CONDO B

City
MADISONState
WIZip Code
53704-1466FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

369.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2025

Transaction ID : SA11A.1244196

Amount of Each Receipt this Period

85.00

☐ Memo Item
CONTRIBUTION

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

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

193.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. LOBERG, BRUCE, , MR.,

Mailing Address 5683 TOWNLINE ROAD

City
STURGEON BAYState
WIZip Code
54235-2378FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2025

Transaction ID : SA11A.1243303

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. LOBERG, BRUCE, , MR.,

Mailing Address 5683 TOWNLINE ROAD

City
STURGEON BAYState
WIZip Code
54235-2378FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244248

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. MARCH, JAMES, R., ,

Mailing Address N3406 VERDE VALLEY ROAD N

City
LA CROSSEState
WIZip Code
54601-2926FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2025

Transaction ID : SA11A.1243680

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

350.00

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

PAGE 17 OF 74

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. MODE, JAMES, R., ,

Mailing Address W6691 KIESLING ROAD

City
JEFFERSONState
WIZip Code
53549-9609FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2025

Transaction ID : SA11A.1244152

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

B. NELSON, GRANT, E., ,

Mailing Address P.O. BOX 365

City
PRESCOTTState
WIZip Code
54021-0365FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244230

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

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

C. NIEDFELDT, RONALD, D., , D.V.M.Mailing Address 326 W PINE STREET APT. 216
326 W PINE ST APT 216City
LAKE MILLSState
WIZip Code
53551-1100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 28 / 2025

Transaction ID : SA11A.1244201

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

11050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. PARENT, JEANINE, M., ,

Mailing Address 422 MAPLEWOOD COURT 14

City
ARCADIAState
WIZip Code
54612-1530FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 28 / 2025

Transaction ID : SA11A.1244210

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. PETERSON, DANIEL, T., MRS.,

Mailing Address 2821 N POLZIN ROAD

City
JANESVILLEState
WIZip Code
53548-9394FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 04 / 2025

Transaction ID : SA11A.1243428

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

C. PLEVA, ROBERT, M., MR.,

Mailing Address 3281 E THOMPSON AVENUE

City
ST FRANCISState
WIZip Code
53235-4921FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLIED INDUSTRIES, INCOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2025

Transaction ID : SA11A.1244171

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

650.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. POSSLEY, SHARON, , ,

Mailing Address N28 W6484 ALYCE STREET

City
CEDARBURGState
WIZip Code
53012-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2025

Transaction ID : SA11A.1244008

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

B. REINHART, JOHN, B., ,

Mailing Address 510 LOSEY COURT LANE

City
LA CROSSEState
WIZip Code
54601-3917FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REINHART REAL ESTATEOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 25 / 2025

Transaction ID : SA11A.1244131

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

C. SCHUETTELZ, ALVIN, H., ,

Mailing Address 2488 REGINALD HILL

City
DE PEREState
WIZip Code
54115-1680FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2025

Transaction ID : SA11A.1244053

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

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

950.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. TESTWUIDE, RICHARD, , ,

Mailing Address N7863 LAKESIDE PARK ROAD

City
ELKHART LAKEState
WIZip Code
53020-1811FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 09 / 2025

Transaction ID : SA11A.1243673

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. TOY, CYLVIA, L., ,

Mailing Address 13700 EASTCLIFF CIRCLE

City
CENTREVILLEState
VAZip Code
20120-1761FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2025

Transaction ID : SA11A.1243782

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

C. TOY, CYLVIA, L., ,

Mailing Address 13700 EASTCLIFF CIRCLE

City
CENTREVILLEState
VAZip Code
20120-1761FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2025

Transaction ID : SA11A.1243942

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

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

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

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. WOOD, RICHARD, H., ,

Mailing Address 1965 W RIDGE ROAD

City
COTTAGE GROVEState
WIZip Code
53527-9420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244235

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

B. WOYAK, ALFRED, P., ,

Mailing Address S77W12929 MCSHANE DRIVE, APT. C102

City
MUSKEGOState
WIZip Code
53150-4060FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 24 / 2025

Transaction ID : SA11A.1244032

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. WUESTHOFF, WILLIAM, E., ,

Mailing Address 10737 N ESSEX COURT

City
MEQUONState
WIZip Code
53092-8531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 24 / 2025

Transaction ID : SA11A.1244074

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. ZIBELL, BARBARA, R., ,

Mailing Address 9412 N WAVERLY DRIVE

City
MILWAUKEEState
WIZip Code
53217-1343FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2025

Transaction ID : SA11A.1243331

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

B. WINREDMailing Address 1776 WILSON BOULEVARD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

106814.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2025

Transaction ID : SA11C.1243690

Amount of Each Receipt this Period

777.54

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

C. FREY, ALAN, G., ,

Mailing Address 961 BRIGHTON DRIVE

City
MENASHAState
WIZip Code
54952-2944FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BC ZIEGLEROccupation (for Individual)
INVESTMENT BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2025

Transaction ID : SA11A.1243716

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

245.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. LAZICKI, TIMOTHY, , ,

Mailing Address 1068 BRYNHILL DRIVE

City
OREGONState
WIZip Code
53575-3894FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SSM HEALTHOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2025

Transaction ID : SA11A.1243700

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

B. WINREDMailing Address 1776 WILSON BOULEVARD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

106814.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2025

Transaction ID : SA11C.1243847

Amount of Each Receipt this Period

891.20

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

C. EGAN, DENNIS, N., ,

Mailing Address 362 FAIRWAY DRIVE

City
MILTONState
WIZip Code
53563-1367FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

271.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2025

Transaction ID : SA11A.1243854

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

130.13

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. LINDENBERG, LARRY, , ,

Mailing Address 846 DOERFLER DR

City
KIMBERLYState
WIZip Code
54136-2304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2025

Transaction ID : SA11A.1243848

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

B. LINDENBERG, LARRY, , ,

Mailing Address 846 DOERFLER DR

City
KIMBERLYState
WIZip Code
54136-2304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2025

Transaction ID : SA11A.1243870

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

C. MAIN, JEFFERY, , ,

Mailing Address 52 MCINTOSH ROAD E

City
LA CRESCENTState
MNZip Code
55947-1073FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SKOGENS FOODLINER, INCOccupation (for Individual)
IT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2025

Transaction ID : SA11A.1243859

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

155.13

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. NELSON, JAMES, M., MR.,

Mailing Address 12638 N RIVER FOREST DRIVE

City
MEQUONState
WIZip Code
53092-2536FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2025

Transaction ID : SA11A.1243850

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

B. WINREDMailing Address 1776 WILSON BOULEVARD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

106814.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2025

Transaction ID : SA11C.1243945

Amount of Each Receipt this Period

311.54

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

C. EGAN, DENNIS, N., ,

Mailing Address 362 FAIRWAY DRIVE

City
MILTONState
WIZip Code
53563-1367FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

271.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2025

Transaction ID : SA11A.1243946

Amount of Each Receipt this Period

21.08

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

71.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. FREDERICK, JENNIE, C., ,

Mailing Address N171 W20571 VALLEY DRIVE

City
JACKSONState
WIZip Code
53037-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2025

Transaction ID : SA11A.1243953

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

B. LINDENBERG, LARRY, , ,

Mailing Address 846 DOERFLER DR

City
KIMBERLYState
WIZip Code
54136-2304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2025

Transaction ID : SA11A.1243963

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

C. WINREDMailing Address 1776 WILSON BOULEVARD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

106814.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11C.1244262

Amount of Each Receipt this Period

1428.71

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

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

77.05

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. ARBRAMOWSKI, ROBERT, , ,

Mailing Address 9253 W SPINDLE TOP

City
FRANKLINState
WIZip Code
53132-1963FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244279

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

B. FREA, RONALD, G., ,

Mailing Address W220N2753 MAPLEWOOD LANE

City
WAUKESHAState
WIZip Code
53186-1057FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244302

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

C. HILDEBRANDT, MARY, K., ,Mailing Address 3404 CUMMINGS AVE
CUMMINGS AVECity
EAU CLAIREState
WIZip Code
54701-7326FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244264

Amount of Each Receipt this Period

40.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

394.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. LINDENBERG, LARRY, , ,

Mailing Address 846 DOERFLER DR

City
KIMBERLYState
WIZip Code
54136-2304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244299

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

B. LINDENBERG, LARRY, , ,

Mailing Address 846 DOERFLER DR

City
KIMBERLYState
WIZip Code
54136-2304FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244306

Amount of Each Receipt this Period

8.34

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

33.34

20843.83

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

PAGE 29 OF 74

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. FRIENDS OF TERRY VIRGIL

Mailing Address W9194 RIPLEY ROAD LOT 25

City
CAMBRIDGEState
WIZip Code
53523-9573FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2025

Transaction ID : SA11C.1243556

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION - FED FUNDS PERMISSIBLE

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

50.00

50.00

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

PAGE 30 OF 74

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. GROW THE MAJORITY

Mailing Address 228 S WASHINGTON ST STE 115

City
ALEXANDRIAState
VAZip Code
22314-5404FEC ID number of contributing
federal political committee.

C C00858373

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

101750.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2025

Transaction ID : SA12.1244624

Amount of Each Receipt this Period

64653.47

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

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

B. ANWAR, S., JAVAID, ,

Mailing Address 110 N. MARIENFELD

City
MIDLANDState
TXZip Code
79701-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

MIDLAND ENERGY

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2025

Transaction ID : SA12.1244654

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

C. BEAL, D, ANDREW, ,

Mailing Address 6000 LEGACY DRIVE

City
PLANOState
TXZip Code
75024-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

BEAL BANK

FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2025

Transaction ID : SA12.1244658

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

64653.47

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 74
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. FRIESE, DON, , ,

Mailing Address 20021 NORTHRIDGE ROAD

City
LOS ANGELESState
CAZip Code
91311-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2025

Transaction ID : SA12.1244652

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

B. MALONE, JOHN, C., ,

Mailing Address 440 SOUTH BEACH ROAD

City
JUPITER ISLANDState
FLZip Code
33455-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MEDIAOccupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2910.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2025

Transaction ID : SA12.1244651

Amount of Each Receipt this Period

2910.40

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

C. MASTROIANNI, NICHOLAS, , , II

Mailing Address 691 U.S. 1

City
TEQUESTAState
FLZip Code
33469-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US IMMIGRATION FUND LLCOccupation (for Individual)
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2423.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2025

Transaction ID : SA12.1244650

Amount of Each Receipt this Period

2423.17

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 74
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. PENSKE, ROGER, S., ,

Mailing Address 2555 S TELEGRAPH RD

City
BLOOMFIELD HILLSState
MIZip Code
48302-0912FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PENSKE CORPOccupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 16 / 2025

Transaction ID : SA12.1244657

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

B. PEROT, ROSS, , , JR.

Mailing Address 3000 TURTLE CREEK BOULEVARD

City
DALLASState
TXZip Code
75219-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE PEROT GROUPOccupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2025

Transaction ID : SA12.1244656

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

C. RABOIS, KEITH, , ,

Mailing Address 1429 NORTH VENETIAN WAY

City
MIAMI BEACHState
FLZip Code
33139-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KHOSLA VENTURESOccupation (for Individual)
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2025

Transaction ID : SA12.1244653

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 74
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. SINQUEFIELD, REX, A., ,

Mailing Address P.O. BOX4947

City
ST LOUISState
MOZip Code
63108-0947FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2025

Transaction ID : SA12.1244655

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: GROW THE MAJORITY

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

B. NRSC VICTORYMailing Address 228 S WASHINGTON ST
STE 115City
ALEXANDRIAState
VAZip Code
22314-5404FEC ID number of contributing
federal political committee.

C C00837518

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27706.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2025

Transaction ID : SA12.1244177

Amount of Each Receipt this Period

27706.37

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

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

C. KOTICK, ROBERT, , ,

Mailing Address 3435 OCEAN PARK BLVD #107 PMB K

City
SANTA MONICAState
CAZip Code
90405-3320FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACTUISIONOccupation (for Individual)
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2195.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 14 / 2025

Transaction ID : SA12.1244179

Amount of Each Receipt this Period

2195.12

☒ Memo Item

TRANSFER

JFC ATTRIB: NRSC VICTORY

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

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

27706.37

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

PAGE 34 OF 74

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. RICKETTS, JOHN, P., ,

Mailing Address 6450 PRAIRIE AVE

City
OMAHAState
NEZip Code
68132-2746FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERITRADEOccupation (for Individual)
BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2025

Transaction ID : SA12.1244180

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: NRSC VICTORY

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

B. RICKETTS, JOHN, JOE, ,

Mailing Address 607 UPPER HOBACK RIVER ROAD

City

BONDURANT

State

WY

Zip Code

82922-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ENTREPRENEUR & PHILANTHROPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2025

Transaction ID : SA12.1244181

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: NRSC VICTORY

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

C. YASS, JEFF, , ,Mailing Address 401 CITY AVENUE
UNIT 220

City

BALA CYNWYD

State

PA

Zip Code

19004-1117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SIGOccupation (for Individual)
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2025

Transaction ID : SA12.1244178

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: NRSC VICTORY

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 74
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. STEIL VICTORY FUND

Mailing Address 1818 MILTON AVE

City
JANESVILLEState
WIZip Code
53545-1129FEC ID number of contributing
federal political committee.**C**

C00686980

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

97568.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2025**Transaction ID : SA12.1244626**

Amount of Each Receipt this Period

81046.36

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

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

B. BAUM, DAVID, , ,

Mailing Address 4315 WEST GULF DRIVE

City
SANIBELState
FLZip Code
33957-5105FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
DSB TECHNOLOGIES LLCOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2025**Transaction ID : SA12.1244632**

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

C. BAUM, JUDY, , ,

Mailing Address 4315 WEST GULF DRIVE

City
SANIBELState
FLZip Code
33957-5105FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2025**Transaction ID : SA12.1244633**

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

81046.36

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 74
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. BOWEN, JAMES, A., ,

Mailing Address 264 10TH AVENUE SOUTH

City
NAPLESState
FLZip Code
34102-6821FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
04	/	01	/	2025

Transaction ID : SA12.1244635

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

B. BOWEN, MARISA, , ,

Mailing Address 264 10TH AVENUE SOUTH

City
NAPLESState
FLZip Code
34102-6821FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
04	/	01	/	2025

Transaction ID : SA12.1244636

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

C. COURI, JERRY, , ,

Mailing Address 4775 HEWITTS POINT ROAD

City
OCONOMOWOCState
WIZip Code
53066-3318FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
COURI INSURANCEOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
05	/	19	/	2025

Transaction ID : SA12.1244638

Amount of Each Receipt this Period

7000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 74

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. COX, EDWARD, A., ,

Mailing Address 479 N LAKESTONE DR.

City
FONTANAState
WIZip Code
53125-FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STREBLOW BOATSOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2025

Transaction ID : SA12.1244634

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

B. LUROS, HILARY, , ,

Mailing Address 5826 NEW TERRITORY BLVD

City
SUGAR LANDState
TXZip Code
77479-5948FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2025

Transaction ID : SA12.1244628

Amount of Each Receipt this Period

7500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

C. NAU, JOHN, L., ,

Mailing Address P.O. BOX 130130

City
HOUSTONState
TXZip Code
77219-0130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SILVER EAGLEOccupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 06 / 2025

Transaction ID : SA12.1244637

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 74
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. OCKO, MATT, , ,

Mailing Address 5826 NEW TERRITORY BLVD

City
SUGAR LANDState
TXZip Code
77479-5948FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DCVCOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8768.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2025

Transaction ID : SA12.1244627

Amount of Each Receipt this Period

8768.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

B. SHAH, APOORVA, , ,

Mailing Address 5924 INTERLACHEN BOULEVARD

City
MINNEAPOLISState
MNZip Code
55436-1330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SAM HPRP CHEMICALS INCOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2025

Transaction ID : SA12.1244631

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

C. WINKLEVOSS, CAMERON, , ,Mailing Address 30 W 24TH ST
FL 4City
NEW YORKState
NYZip Code
10010-3558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINKLEVOSS CAPITALOccupation (for Individual)
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2025

Transaction ID : SA12.1244629

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 74

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. WINKLEVOSS, TYLER, , ,Mailing Address 30 W 24TH ST
FL 4City
NEW YORKState
NYZip Code
10010-3558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WINKLEVOSS CAPITALOccupation (for Individual)
FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2025

Transaction ID : SA12.1244630

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

B. YOUNG, FRED, M., ,

Mailing Address 3201 MICHIGAN BOULEVARD

City
RACINEState
WIZip Code
53402-3819FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2025

Transaction ID : SA12.1244639

Amount of Each Receipt this Period

6000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: STEIL VICTORY FUND

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

C. VAN ORDEN VICTORY FUND

Mailing Address 11972 GREY OAKS PARK RD.

City
GLEN ALLENState
VAZip Code
23059-5778FEC ID number of contributing
federal political committee.

C C00816017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

9707.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA12.1244226

Amount of Each Receipt this Period

9707.10

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

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

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

9707.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 74
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. LONG, CHARLES, , ,

Mailing Address 1903 PEYCO DRIVE NORTH

City
ARLINGTONState
TXZip Code
76001-6705FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REILABLE PAVINGOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2025

Transaction ID : SA12.1244229

Amount of Each Receipt this Period

10000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: VAN ORDEN VICTORY FUND

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

B. SILSETH, JOHN, MARTIN, MR.,Mailing Address 15815 CHOCTAW TRAIL
SUITE 275City
BROOKFIELDState
WIZip Code
53005-5596FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MARKET STREETOccupation (for Individual)
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2025

Transaction ID : SA12.1244227

Amount of Each Receipt this Period

2000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: VAN ORDEN VICTORY FUND

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

C. WEGNER, KENNETH, , ,

Mailing Address 268 S COTTAGE HILL AVE

City
ELMHURSTState
ILZip Code
60126-3333FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EXECUTIVE MANAGEMENTOccupation (for Individual)
THE JEL SERT COMPANY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2025

Transaction ID : SA12.1244228

Amount of Each Receipt this Period

2000.00

☒ Memo Item

TRANSFER

JFC ATTRIB: VAN ORDEN VICTORY FUND

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

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

0.00

183113.30

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

PAGE 41 OF 74

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

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

A. BMO BANK, N.A.

Mailing Address 770 N WATER ST

City
MILWAUKEEState
WIZip Code
53202-0002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3195.85

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11A.1244625

Amount of Each Receipt this Period

512.62

☐ Memo Item

CONTRIBUTION

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

512.62

512.62

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

PAGE 42 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. 1301 GREENFIELD LLC

Mailing Address 1301 W GREENFIELD AVE

City
MILWAUKEEState
WIZip Code
53204

Purpose of Disbursement

OFFICE RENT

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4906

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ADVANTAGE INC

Mailing Address 9420 BONITA BEACH ROAD S.E.

City
BONITA SPRINGSState
FLZip Code
34135

Purpose of Disbursement

AUTODIALER

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I49064

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	1			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4906

Amount of Each Disbursement this Period

18.75

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

4518.75

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

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

PAGE 43 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	5			

FEC Identification Number

C

Transaction ID : SB21B.I4906

Amount of Each Disbursement this Period

5.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	5			

FEC Identification Number

C

Transaction ID : SB21B.I4906

Amount of Each Disbursement this Period

19.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	7			2	0	5			

FEC Identification Number

C

Transaction ID : SB21B.I4906

Amount of Each Disbursement this Period

6.88

☐ Memo Item

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

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

32.28

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

PAGE 44 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	0			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4906

Amount of Each Disbursement this Period

13.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

1.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	5			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

2.55

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

17.22

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

PAGE 45 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

 1.05☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

 2.70☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ASPECT CONSULTING LLCMailing Address 8383 GREENWAY BLVD
STE 600City
MIDDLETONState
WIZip Code
53562

Purpose of Disbursement

COMPLIANCE CONSULTING

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

 5000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 5003.75

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

PAGE 46 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. BK DATA STRATEGY LLC

Mailing Address 405 DORAL COURT

City
WAUNAKEEState
WIZip Code
53597

Purpose of Disbursement

DATA CONSULTING

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BMO BANKMailing Address PO BOX 5700
MADISONCity
CAROL STREAMState
ILZip Code
60197

Purpose of Disbursement

BANK FEE

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

610.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BMO BANK CREDIT CARD

Mailing Address PO BOX 5700

City
CAROL STREAMState
ILZip Code
60197

Purpose of Disbursement

CREDIT CARD PAYMENT

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

15204.92

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

18315.83

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

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

PAGE 47 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. AMAZON

Mailing Address 410 TERRY AVE. N

City
SEATTLEState
WAZip Code
98109

Purpose of Disbursement

OFFICE SUPPLIES

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4913

Amount of Each Disbursement this Period

196.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 2701 SUMMER STREET

City
STAMFORDState
CTZip Code
06905

Purpose of Disbursement

STAFF TRAVEL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I49145

Amount of Each Disbursement this Period

36.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address 208 S. AKARD ST

City
DALLASState
TXZip Code
75202-9100

Purpose of Disbursement

INTERNET

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4913

Amount of Each Disbursement this Period

167.50

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

0.00

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

PAGE 48 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. CAMPAIGN MONITOR

Mailing Address 11 LEA AVENUE

City
NASHVILLEState
TNZip Code
37210

Purpose of Disbursement

DATABASE SOFTWARE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4913

Amount of Each Disbursement this Period

799.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address PO BOX 1140

City
MEMPHISState
TNZip Code
38101

Purpose of Disbursement

SHIPPING EXPENSE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4914

Amount of Each Disbursement this Period

188.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. GFL ENVIRONMENTAL

Mailing Address P.O. BOX 555193

City
DETROITState
MIZip Code
48255

Purpose of Disbursement

TRASH REMOVAL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4915

Amount of Each Disbursement this Period

804.02

☒ Memo Item

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

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEWState
CAZip Code
94043

Purpose of Disbursement

ONLINE SERVICES

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4914

Amount of Each Disbursement this Period

1199.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MADISON GAS AND ELECTRIC

Mailing Address PO BOX 1231

City
MADISONState
WIZip Code
53701-1231

Purpose of Disbursement

UTILITIES

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	0			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4915

Amount of Each Disbursement this Period

530.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. NETSUITE, INC.Mailing Address 2955 CAMPUS DRIVE
SUITE 100City
SAN MATEOState
CAZip Code
94403

Purpose of Disbursement

SOFTWARE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4915

Amount of Each Disbursement this Period

639.76

☒ Memo Item

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

0.00

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

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

PAGE 50 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. RUMBLEUP, LLC

Mailing Address 2021 L ST. NW

City
WASHINGTONState
DCZip Code
20036

Purpose of Disbursement

SUBSCRIPTION

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4915

Amount of Each Disbursement this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SEQUIUM ASSET SOLUTION

Mailing Address 1130 NORTHCHASE PARKWAY SOUTHEAST

City
MARIETTAState
GAZip Code
30067-6413

Purpose of Disbursement

INTERNET

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I49137

Amount of Each Disbursement this Period

296.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SHRED-ITMailing Address 28883 NETWORK PLACE
SUITE 112City
CHICAGOState
ILZip Code
60673

Purpose of Disbursement

SHREDDING SERVICE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4914

Amount of Each Disbursement this Period

359.34

☒ Memo Item

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

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. STAPLES INC.

Mailing Address 500 STAPLES DR.

City
FRAMINGHAMState
MAZip Code
01702

Purpose of Disbursement

OFFICE SUPPLIES

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4914I

Amount of Each Disbursement this Period

263.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TDS METROCOM

Mailing Address PO BOX 94510

City
PALATINEState
ILZip Code
60094

Purpose of Disbursement

PHONE/INTERNET

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4913I

Amount of Each Disbursement this Period

1900.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THE INGLESIDE HOTEL

Mailing Address 2810 GOLF RD

City
PEWAUKEEState
WIZip Code
53072

Purpose of Disbursement

ROOM RENTAL - NOT FEA

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.I4913I

Amount of Each Disbursement this Period

5649.83

☒ Memo Item

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

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

0.00

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

PAGE 52 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. TRUMP NATIONAL DORAL

Mailing Address 4400 NORTHWEST 87TH AVENUE

City
DORALState
FLZip Code
33178

Purpose of Disbursement

STAFF TRAVEL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I49141

Amount of Each Disbursement this Period

765.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. US POSTMASTER

Mailing Address 475 LENFANT PLAZA SW

City
WASHINGTONState
DCZip Code
20260

Purpose of Disbursement

POSTAGE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I49142

Amount of Each Disbursement this Period

342.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. WALGREENS

Mailing Address 15 E MAIN ST

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

OFFICE SUPPLIES

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4914

Amount of Each Disbursement this Period

234.15

☒ Memo Item

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

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

0.00

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

PAGE 53 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. CITY OF MADISON TREASURER

Mailing Address PO BOX 2999

City
MADISONState
WIZip Code
53701-3388Purpose of Disbursement
MUNICIPAL SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

129.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CLOCKWORK SYSTEMS

Mailing Address 729 ARGYLE ROAD

City
SILVER SPRINGState
MDZip Code
20901Purpose of Disbursement
LIST RENTAL - NOT FEA

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4907

Amount of Each Disbursement this Period

450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CMDIMailing Address 1593 SPRING HILL ROAD
SUITE 400City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE SOFTWARE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	9			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4908

Amount of Each Disbursement this Period

902.50

☐ Memo Item

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

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

1482.02

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. FIRST STREET PLLC

Mailing Address 625 NORTH WASHINGTON STREET
STE. 325

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement

LEGAL SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 27 / 2025

FEC Identification Number

C Transaction ID : SB21B.I4908

Amount of Each Disbursement this Period

3375.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GREAT AMERICA FINANCIAL SERVICES

Mailing Address P.O. BOX 660831

City
DALLAS

State
TX

Zip Code
75266

Purpose of Disbursement

OFFICE MACHINES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 27 / 2025

FEC Identification Number

C Transaction ID : SB21B.I4908

Amount of Each Disbursement this Period

3004.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. H2H STRATEGIES LLC

Mailing Address 4683 BELLEVUE ROAD

City
ONONDAGA

State
MI

Zip Code
49264

Purpose of Disbursement

PRINTING LITERATURE - NOT FEA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 27 / 2025

FEC Identification Number

C Transaction ID : SB21B.I4908

Amount of Each Disbursement this Period

756.63

☐ Memo Item

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

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

7136.26

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

PAGE 56 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. PRO ONE JANITORIAL INC

Mailing Address 1101 ASHWAUBENON ST.

City
GREEN BAYState
WIZip Code
54304-1133Purpose of Disbursement
JANITORIAL SERVICES

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4908

Amount of Each Disbursement this Period

595.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REDBIRD SECURITY LLC

Mailing Address N88W16424 MAIN STREET, STE. 201

City
MENOMONEE FALLSState
WIZip Code
53051Purpose of Disbursement
OFFICE SECURITY

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4909

Amount of Each Disbursement this Period

212.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SUN LIFE

Mailing Address P.O. BOX 807009

City
KANSAS CITYState
MOZip Code
64180Purpose of Disbursement
INSURANCE

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4909

Amount of Each Disbursement this Period

594.08

☐ Memo Item

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

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

1401.67

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

PAGE 57 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WAUKESHA EAST COMMERCE CENTER LLC

Mailing Address 1703 PEARL STREET

City
WAUKESHAState
WIZip Code
53186

Purpose of Disbursement

OFFICE RENT

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4909

Amount of Each Disbursement this Period

216.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WE ENERGIES MILWAUKEE

Mailing Address PO BOX 1125

City
GLENVIEWState
ILZip Code
60025

Purpose of Disbursement

UTILITIES

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4909

Amount of Each Disbursement this Period

575.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINREDMailing Address PO BOX 9891
SUITE 530City
ARLINGTONState
VAZip Code
22219

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	8			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4909

Amount of Each Disbursement this Period

30.67

☐ Memo Item

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

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

822.27

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

PAGE 58 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WINREDMailing Address PO BOX 9891
SUITE 530City
ARLINGTONState
VAZip Code
22219

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	5			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4909!

Amount of Each Disbursement this Period

35.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINREDMailing Address PO BOX 9891
SUITE 530City
ARLINGTONState
VAZip Code
22219

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4909!

Amount of Each Disbursement this Period

19.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINREDMailing Address PO BOX 9891
SUITE 530City
ARLINGTONState
VAZip Code
22219

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	2	5	

FEC Identification Number

C

Transaction ID : SB21B.I4909

Amount of Each Disbursement this Period

56.33

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

111.28

48851.04

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

PAGE 59 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. NRSC

Mailing Address 425 2ND STREET NE

City
WASHINGTONState
DCZip Code
20002-4914

Purpose of Disbursement

CONTRIBUTION

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	5			2	0	2	5		

FEC Identification Number

C C00027466

Transaction ID : SB22.I49088

Amount of Each Disbursement this Period

26321.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

26321.00

26321.00

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

PAGE 60 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. BANFIELD, JENNA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4909

Amount of Each Disbursement this Period

1994.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BANFIELD, JENNA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4909

Amount of Each Disbursement this Period

2235.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BENSON, MARISSA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4910

Amount of Each Disbursement this Period

2056.02

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

6285.40

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

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

PAGE 61 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. BENSON, MARISSA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4910

Amount of Each Disbursement this Period

2689.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CALDERON, MARTIN, , ,Mailing Address 148 E JOHNSON STREET
APT. 206City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49102

Amount of Each Disbursement this Period

1004.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CALDERON, MARTIN, , ,Mailing Address 148 E JOHNSON STREET
APT. 206City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4910

Amount of Each Disbursement this Period

1004.24

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

4697.78

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

PAGE 62 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ESTENSON, CHRISTINA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4910!

Amount of Each Disbursement this Period

1910.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ESTENSON, CHRISTINA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4910!

Amount of Each Disbursement this Period

2744.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LAFLIN, SAMANTHA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4910

Amount of Each Disbursement this Period

2126.28

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

6781.34

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

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

PAGE 63 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. LAFLIN, SAMANTHA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49101

Amount of Each Disbursement this Period

2180.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LOGAN, JASPER, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49101

Amount of Each Disbursement this Period

1466.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LOGAN, JASPER, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4911

Amount of Each Disbursement this Period

1648.36

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

5295.56

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

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

PAGE 64 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. MUELLER, STEPHEN, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4911'

Amount of Each Disbursement this Period

2496.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MUELLER, STEPHEN, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49112

Amount of Each Disbursement this Period

2496.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NAJERA, DAVID, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4911

Amount of Each Disbursement this Period

1054.54

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

6047.90

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

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

PAGE 65 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. NAJERA, DAVID, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49114

Amount of Each Disbursement this Period

1113.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGUTSE, ERIK, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49115

Amount of Each Disbursement this Period

1933.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGUTSE, ERIK, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4911

Amount of Each Disbursement this Period

1944.23

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

4991.87

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

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

PAGE 66 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. RICKARD, ANIKA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C Transaction ID : SB30B.I49111

Amount of Each Disbursement this Period

2261.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RICKARD, ANIKA, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C Transaction ID : SB30B.I49111

Amount of Each Disbursement this Period

2261.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SCHIMMING, BRIAN, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C Transaction ID : SB30B.I49111

Amount of Each Disbursement this Period

4514.65

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

9037.40

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

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

PAGE 67 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. SCHIMMING, BRIAN, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49121

Amount of Each Disbursement this Period

4139.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STUCKMANN, HALEY, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49121

Amount of Each Disbursement this Period

2127.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STUCKMANN, HALEY, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49121

Amount of Each Disbursement this Period

2379.97

☐ Memo Item

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

8646.78

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

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

PAGE 68 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. WILEMAN, JORDAN, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4912

Amount of Each Disbursement this Period

2311.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILEMAN, JORDAN, , ,

Mailing Address 148 E JOHNSON STREET

City
MADISONState
WIZip Code
53703

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49124

Amount of Each Disbursement this Period

2311.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City
HAUPPAUGEState
NYZip Code
11788

Purpose of Disbursement

PAYROLL TAX

Candidate Name

Category/
Type

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I4912

Amount of Each Disbursement this Period

10238.72

☐ Memo Item

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

14861.40

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

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

PAGE 69 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City
HAUPPAUGEState
NYZip Code
11788Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

FEC Identification Number

C

Transaction ID : SB30B.I49121

Amount of Each Disbursement this Period

375.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City
HAUPPAUGEState
NYZip Code
11788Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

FEC Identification Number

C

Transaction ID : SB30B.I49127

Amount of Each Disbursement this Period

111.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City
HAUPPAUGEState
NYZip Code
11788Purpose of Disbursement
PAYROLL TAX

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Transaction ID : SB30B.I4912

Amount of Each Disbursement this Period

10189.74

☐ Memo Item

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

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

10675.74

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

PAGE 70 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City
HAUPPAUGEState
NYZip Code
11788Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2025

FEC Identification Number

C

Transaction ID : SB30B.I4912

Amount of Each Disbursement this Period

107.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACCOUNTANTS WORLD PAYROLL LLC

Mailing Address 140 FELL COURT

City
HAUPPAUGEState
NYZip Code
11788Purpose of Disbursement
PAYROLL PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2025

FEC Identification Number

C

Transaction ID : SB30B.I4913

Amount of Each Disbursement this Period

375.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN FUNDS SERVICE COMPANY

Mailing Address P.O. BOX 6164

City
INDIANAPOLISState
INZip Code
46206-6164Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2025

FEC Identification Number

C

Transaction ID : SB30B.I4913

Amount of Each Disbursement this Period

1778.14

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

2260.14

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

PAGE 71 OF 74

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

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. AMERICAN FUNDS SERVICE COMPANY

Mailing Address P.O. BOX 6164

City
INDIANAPOLISState
INZip Code
46206-6164

Purpose of Disbursement

EMPLOYEE BENEFITS

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49133

Amount of Each Disbursement this Period

1940.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MILLIMAN

Mailing Address 18295 CAPITAL AVE, STE. 400

City
OMAHAState
NEZip Code
68022

Purpose of Disbursement

EMPLOYEE BENEFITS

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7		2	0	2	5		

FEC Identification Number

C

Transaction ID : SB30B.I49133

Amount of Each Disbursement this Period

6954.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

8895.41

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

88476.72

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Transaction ID : 071625A

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- ☒ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Indicate ratio below**Federal..... %Nonfederal %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 73 OF 74

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN
NONFEDERAL ACCOUNT

DATE OF RECEIPT

MM / DD / YYYY
06 / 27 / 2025

TOTAL AMOUNT TRANSFERRED

3524.15

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3524.15

Transaction ID : 071625B

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

3524.15

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

3524.15

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.49061 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
2220-2244 N MLK LLC			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2228 N. DR. MARTIN LUTHER KING DR.			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MILWAUKEE	State WI	Zip Code 53212	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE RENT		001 Category/ Type	Allocated Activity or Event Year-To-Date 380801.25	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2025"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
621.91			3524.15	4146.06

B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.49062 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
PITNEY BOWES BANK INC			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO BOX 981026			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City BOSTON	State MA	Zip Code 02298	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: POSTAGE		001 Category/ Type	Allocated Activity or Event Year-To-Date 381111.30	
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2025"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
46.51			263.54	310.05

C. Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
Mailing Address			<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
State			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Zip Code			Allocated Activity or Event Year-To-Date	
Purpose of Disbursement:			Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
Activity or Event Identifier:				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
668.42		3787.69		4456.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
668.42		3787.69		4456.11