

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		133633.78
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	800448.23									
(c) Total Receipts (from Line 19)	75265.27	10014665.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	875713.50	10148299.58								
7. Total Disbursements (from Line 31)	588777.98	9861364.06								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	286935.52	286935.52								
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:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	7885.00	725744.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	64631.67	979910.48
(iii) TOTAL (add Lines 11(a)(i) and (ii)	72516.67	1705654.48
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	124655.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	72516.67	1830309.48
12. Transfers From Affiliated/Other Party Committees	0.00	8158203.40
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)	2748.60	26152.92
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	75265.27	10014665.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	75265.27	10014665.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4410.44	50977.79
(ii) Non-Federal Share.....	11341.16	131085.95
(b) Other Federal Operating Expenditures.....	53563.19	783548.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	69314.79	965611.92
22. Transfers to Affiliated/Other Party Committees.....	340000.00	3405800.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	6640.76
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	25000.00
26. Loan Repayments Made.....	26543.70	26543.70
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	75.00	5525.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	75.00	6525.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	152844.49	5425242.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	152844.49	5425242.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	588777.98	9861364.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	577436.82	9730278.11

DETAILED SUMMARY PAGE
of Disbursements

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	72516.67	1830309.48
34. Total Contribution Refunds (from Line 28(d))	75.00	6525.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	72441.67	1823784.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	57973.63	834525.97
37. Offsets to Operating Expenditures (from Line 15, page 3)	2748.60	26152.92
38. Net Operating Expenditures (subtract Line 37 from Line 36)	55225.03	808373.05

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 110

(check only one)

<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

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

A.

Full Name (Last, First, Middle Initial)
Joanne Aulenbacher

Mailing Address N6122 Wolf River Rd

City State Zip Code
Shawano WI 54166

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

Name of Employer Occupation
N/A Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 625.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.36889

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Charles Balts

Mailing Address 4510 Putter Dr

City State Zip Code
Eau Claire WI 54701

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

Name of Employer Occupation
Held Homes General Contractor

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 620.00

Date of Receipt

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

Transaction ID: SA11AI.36859

Amount of Each Receipt this Period

20.00

Contribution

C.

Full Name (Last, First, Middle Initial)
John Barrette

Mailing Address 930 25th Place

City State Zip Code
Wisconsin Rapids WI 54494

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

Name of Employer Occupation
N/A retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.36888

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 7 / 110
(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

A. Full Name (Last, First, Middle Initial)
Carol Bayerlein

Mailing Address 1810 Wedgewood Dr. East

City State Zip Code
Elm Grove WI 53122

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

Name of Employer: Franciscian Shared Lab Occupation: Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 18 / 2008
Transaction ID: SA11AI.36876
Amount of Each Receipt this Period: 500.00
Contribution

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

Mailing Address 2813 12th Str

City State Zip Code
Two Rivers WI 54241

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

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 12 / 2008
Transaction ID: SA11AI.36854
Amount of Each Receipt this Period: 100.00
Contribution

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

Mailing Address 2016 Bay Pt Ln

City State Zip Code
Hartland WI 53029

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

Name of Employer: Perlick Corp Occupation: Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 01 / 2008
Transaction ID: SA11AI.36924
Amount of Each Receipt this Period: 300.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 900.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 110
(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

A. Full Name (Last, First, Middle Initial)
Don Bleser

Mailing Address 1804 30th St

City State Zip Code
Two Rivers WI 54241

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	9	/	2	0	0	8

Transaction ID: SA11AI.36949

Amount of Each Receipt this Period
50.00

Contribution

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

Mailing Address 1804 30th St

City State Zip Code
Two Rivers WI 54241

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

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

Transaction ID: SA11AI.36875

Amount of Each Receipt this Period
150.00

Contribution

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

Mailing Address 3601 Sunset Dr

City State Zip Code
Madison WI 53705

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.36887

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 110
	<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

A.	Full Name (Last, First, Middle Initial) Hertha Dederig		Date of Receipt
	Mailing Address 2129 Illinois Ave		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	New Holstein	WI	53061
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36897
Name of Employer Information requested		Occupation Information requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="600.00"/>	Contribution

B.	Full Name (Last, First, Middle Initial) William Flader		Date of Receipt
	Mailing Address 17 Fuller Drive		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Madison	WI	53704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36940
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="750.00"/>	Contribution

C.	Full Name (Last, First, Middle Initial) Alvin Greason		Date of Receipt
	Mailing Address N8145 School Forrest Lane		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Crivitz	WI	54114
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36852
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="550.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 110
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
Richard Grossman

Mailing Address 11702 W Mequon Road 112N

City State Zip Code
Mequon WI 53097

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

Name of Employer Occupation
Kromer Cap Co., Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: SA11AI.36866

Amount of Each Receipt this Period
100.00

Contribution

B.

Full Name (Last, First, Middle Initial)
William Hawley

Mailing Address 830 12th Ave

City State Zip Code
Baldwin WI 54002

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: SA11AI.36863

Amount of Each Receipt this Period
100.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Charles Heide

Mailing Address 5825 Sixth Place

City State Zip Code
Kenosha WI 53144

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

Name of Employer Occupation
Vesta, Inc Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 05 / 2008

Transaction ID: SA11AI.36945

Amount of Each Receipt this Period
150.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **350.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 110

(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
Kathryn Heide

Mailing Address 5825 6th Pl

City State Zip Code
Kenosha WI 53144

FEC ID number of contributing federal political committee. C

Name of Employer Information requested Occupation Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
12 / 11 / 2008

Transaction ID: SA11AI.36850

Amount of Each Receipt this Period 100.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Wallace Hepkema

Mailing Address 10712th Street

City State Zip Code
Racine WI 53403

FEC ID number of contributing federal political committee. C

Name of Employer Information requested Occupation Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY
12 / 01 / 2008

Transaction ID: SA11AI.36928

Amount of Each Receipt this Period 100.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Harold Hoops

Mailing Address 3363 Beach Lane

City State Zip Code
Green Bay WY 54311-7258

FEC ID number of contributing federal political committee. C

Name of Employer Information requested Occupation Information requested
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt MM / DD / YYYY
12 / 15 / 2008

Transaction ID: SA11AI.36864

Amount of Each Receipt this Period 50.00

Contribution

SUBTOTAL of Receipts This Page (optional) 250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

A.	Full Name (Last, First, Middle Initial) Donald Huebner		Date of Receipt
	Mailing Address 18502 White Pine Lane		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Richland Center	WI	53581
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36890
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="300.00"/>	Contribution

B.	Full Name (Last, First, Middle Initial) Gerald Jensen		Date of Receipt
	Mailing Address 869 Glenway Rc		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Oregon	WI	53575
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36941
Name of Employer Information requested		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="550.00"/>	Contribution

C.	Full Name (Last, First, Middle Initial) Margaret Junker		Date of Receipt
	Mailing Address 5717 N. Ames Terrace		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Glendale	WI	53209
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36851
Name of Employer Retired		Occupation Educator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="800.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 110
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
David Kachel

Mailing Address 513 W Center St

City State Zip Code
Whitewater WI 53190

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

Name of Employer Self Occupation
Businessman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: SA11AI.36853

Amount of Each Receipt this Period
200.00

Contribution

B.

Full Name (Last, First, Middle Initial)
David Kachel

Mailing Address 513 W Center St

City State Zip Code
Whitewater WI 53190

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

Name of Employer Self Occupation
Businessman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
MM / DD / YYYY
12 / 30 / 2008

Transaction ID: SA11AI.36892

Amount of Each Receipt this Period
250.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Herbert Kohler

Mailing Address 441 Green Tree Road

City State Zip Code
Kohler WI 53044

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

Name of Employer The Kohler Company Occupation
Chairman/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
12 / 30 / 2008

Transaction ID: SA11AI.36891

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 110

(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
John Krueger

Mailing Address 4200 Birch Lane

City State Zip Code
Rhineland WI 54501

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

Name of Employer Occupation
Krueger Law Office Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 370.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.36895

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Stewart Lamb

Mailing Address 4829 N Hollywood Ave

City State Zip Code
Milwaukee WI 53217

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.36872

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Richard Larson

Mailing Address 4920 S Lowes Creek Rd

City State Zip Code
Eau Claire WI 54701

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

Name of Employer Occupation
Information requested Information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

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

Transaction ID: SA11AI.36938

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

A.	Full Name (Last, First, Middle Initial) Vincent Limmex	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 4950 County Rd C	Transaction ID: SA11AI.36862
	City State Zip Code Spring Green WI 53588	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Donald Linder	Date of Receipt MM / DD / YYYY 12 / 10 / 2008
	Mailing Address 619 Aber Dr	Transaction ID: SA11AI.36951
	City State Zip Code Waterford WI 53185	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Information requested	Occupation Information requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Samuel Lowe	Date of Receipt MM / DD / YYYY 12 / 01 / 2008
	Mailing Address 3900 N Main St #112	Transaction ID: SA11AI.36923
	City State Zip Code Racine WI 53402-3600	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 110
(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

A. Full Name (Last, First, Middle Initial)
Paul Markos

Mailing Address 1216 Bluff St

City State Zip Code
LaCrosse WI 54601

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

Name of Employer Information requested Occupation Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 15 / 2008

Transaction ID: SA11AI.36855

Amount of Each Receipt this Period
100.00

Contribution

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

Mailing Address 3102 Old Gate Road, #A

City State Zip Code
Madison WI 53704

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

Name of Employer Refrigeration Systems, Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 30 / 2008

Transaction ID: SA11AI.36898

Amount of Each Receipt this Period
100.00

Contribution

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

Mailing Address W515 Dunphy Rd

City State Zip Code
Albany WI 53502

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

Name of Employer Self Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 30 / 2008

Transaction ID: SA11AI.36879

Amount of Each Receipt this Period
55.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 255.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 110
	<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

A.	Full Name (Last, First, Middle Initial) J Miller		Date of Receipt
	Mailing Address 4933 Evergreen Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Sheboygan	WI	53081
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36857
Name of Employer Miller Engineers & Scientists		Occupation Civ. Engr.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 753.00	<input type="text"/> 100.00
			Contribution

B.	Full Name (Last, First, Middle Initial) James Mode		Date of Receipt
	Mailing Address N2861 Mode Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Fort Atkinson	WI	53538
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36860
Name of Employer Self		Occupation Dairy Farmer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 100.00
			Contribution

C.	Full Name (Last, First, Middle Initial) Nancy Nasvik		Date of Receipt
	Mailing Address 360 Indigo Trail Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 9 / 0 9 / 2 0 0 8
	City	State	Zip Code
	River Falls	WI	54022
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36848
Name of Employer Self		Occupation Home Builder	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 300.00
			Best Efforts Compliance
			[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 110
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
Delos Nelson

Mailing Address 202 Mounth Washington Ave

City Eau Claire State WI Zip Code 54703

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

Name of Employer Information requested Occupation Information requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2008

Transaction ID: SA11AI.36858

Amount of Each Receipt this Period 100.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Dale Nordeen

Mailing Address 4206 Yuma Dr.

City Madison State WI Zip Code 53711

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 30 / 2008

Transaction ID: SA11AI.36886

Amount of Each Receipt this Period 100.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Richard Nordeng

Mailing Address 114 Everglade Dr

City Madison State WI Zip Code 53717-1112

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

Name of Employer Information requested Occupation Information requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 18 / 2008

Transaction ID: SA11AI.36873

Amount of Each Receipt this Period 100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 110
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
Fred Panzer

Mailing Address W6375 Firelane 8

City State Zip Code
Menasha WI 54952

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

Name of Employer Occupation
Radiology Assn of Applet Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.36874

Amount of Each Receipt this Period
250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
David Paulus

Mailing Address 12916 N Fox Hollow Rd

City State Zip Code
Mequon WI 53097

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

Name of Employer Occupation
Wasco President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.36885

Amount of Each Receipt this Period
100.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Marianne Pittman

Mailing Address 230 21st St S

City State Zip Code
La Crosse WI 54601

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

Name of Employer Occupation
Information requested Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.36870

Amount of Each Receipt this Period
35.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 385.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 110
(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

<p>A. Full Name (Last, First, Middle Initial) Timothy Poser</p> <p>Mailing Address 2070 La Chandelle Ct</p> <p>City State Zip Code Brookfield WI 53045</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Dentist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 8</p> <p>Transaction ID: SA11AI.36996</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Contribution</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) James Raffel</p> <p>Mailing Address 2006 N 24th St</p> <p>City State Zip Code Sheboygan WI 53081</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 8</p> <p>Transaction ID: SA11AI.36861</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Anthony Rood</p> <p>Mailing Address 1608 W Winslow Drive</p> <p>City State Zip Code Mequon WI 53092</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 8</p> <p>Transaction ID: SA11AI.36894</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 110
	<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

A.	Full Name (Last, First, Middle Initial) William Ross		Date of Receipt
	Mailing Address PO Box 435		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Shawno	WI	54166-0435
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36867
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="1800.00"/>	Contribution

B.	Full Name (Last, First, Middle Initial) William Ryan		Date of Receipt
	Mailing Address 10819 Ashmont Dr		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Boca Raton	FL	33498
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36896
Name of Employer Information requested		Occupation Information requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="600.00"/>	Contribution

C.	Full Name (Last, First, Middle Initial) Eric Schaumann		Date of Receipt
	Mailing Address PO Box 396		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Racine	WI	53402
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.36937
Name of Employer Information requested		Occupation Information requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 22 / 110
(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

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

Mailing Address W7246 Sunset Ln

City Spooner State WI Zip Code 54801

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

Name of Employer Self Employed Occupation Store Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 17 / 2008
Transaction ID: SA11AI.36869
 Amount of Each Receipt this Period 100.00
 Contribution

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

Mailing Address E8911 N Ashbury Road

City Viroqua State WI Zip Code 54665

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 17 / 2008
Transaction ID: SA11AI.36871
 Amount of Each Receipt this Period 100.00
 Contribution

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

Mailing Address PO Box 1927

City La Crosse State WI Zip Code 54601

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

Name of Employer Hale, Skemp, Hanson Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 12 / 15 / 2008
Transaction ID: SA11AI.36865
 Amount of Each Receipt this Period 100.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 300.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 110
(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

A. Full Name (Last, First, Middle Initial)
Joan Stein

Mailing Address 2055 West Dean Road

City State Zip Code
Milwaukee WI 53217

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

Name of Employer N/A Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 30 / 2008
Transaction ID: SA11AI.36893
Amount of Each Receipt this Period: 500.00
Contribution

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

Mailing Address 5730 I Ah May Tah Rd

City State Zip Code
Oshkosh WI 54901

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 04 / 2008
Transaction ID: SA11AI.36939
Amount of Each Receipt this Period: 50.00
Contribution

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

Mailing Address 72303 Pufal Rd

City State Zip Code
High Bridge WI 54846

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

Name of Employer North Country Lumber Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2650.00

Date of Receipt: 11 / 26 / 2008
Transaction ID: SA11AI.36919
Amount of Each Receipt this Period: 150.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 700.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 110
(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

A. Full Name (Last, First, Middle Initial)
Patrick Suprise
Mailing Address 136 S Pine Ct
City Appleton State WI Zip Code 54914
FEC ID number of contributing federal political committee. **C**
Name of Employer Information requested Occupation Information requested
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 12 / 15 / 2008
Transaction ID: SA11AI.36856
Amount of Each Receipt this Period 100.00
Contribution

B. Full Name (Last, First, Middle Initial)
Richard Teerlink
Mailing Address 1765 Wedgewood West Dr
City Elm Grove State WI Zip Code 53122
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 16 / 2008
Transaction ID: SA11AI.36868
Amount of Each Receipt this Period 250.00
Contribution

C. Full Name (Last, First, Middle Initial)
Joanne Tierney
Mailing Address 3564 Egge Rd
City De Forest State WI Zip Code 53532
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Farmer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 19 / 2008
Transaction ID: SA11AI.37000
Amount of Each Receipt this Period 50.00
Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 400.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 25 / 110
(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

A. Full Name (Last, First, Middle Initial)
Jack Voight

Mailing Address 2508 N. Richmond St.

City State Zip Code
Appleton WI 54911

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

Name of Employer State of Wisconsin Occupation Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
12 / 30 / 2008

Transaction ID: SA11AI.36880

Amount of Each Receipt this Period
50.00

Contribution

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

Mailing Address 927 Cornell Court

City State Zip Code
Madison WI 53705

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

Name of Employer Blackhawk Investments Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 25 / 2008

Transaction ID: SA11AI.36912

Amount of Each Receipt this Period
50.00

Contribution

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

Mailing Address 927 Cornell Court

City State Zip Code
Madison WI 53705

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

Name of Employer Blackhawk Investments Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
12 / 30 / 2008

Transaction ID: SA11AI.36884

Amount of Each Receipt this Period
100.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ► 7885.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 110
(check only one)

<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

A.

Full Name (Last, First, Middle Initial)
FedEx

Mailing Address PO Box 1140

City State Zip Code
Memphis TN 38101

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.33

Date of Receipt
MM / DD / YYYY
12 / 30 / 2008

Transaction ID: SA15.36883

Amount of Each Receipt this Period
391.33

Refund of overpmt

B.

Full Name (Last, First, Middle Initial)
LQ Management LLC

Mailing Address 909 Hidden Ridge Suite 600

City State Zip Code
Irving TX 75038

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
703.52

Date of Receipt
MM / DD / YYYY
11 / 25 / 2008

Transaction ID: SA15.36909

Amount of Each Receipt this Period
703.52

Reimbursement for hotel overpmt

C.

Full Name (Last, First, Middle Initial)
United States Postal Services

Mailing Address PO Box 5066

City State Zip Code
Milwaukee WI 53201-5066

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1122.30

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: SA15.36908

Amount of Each Receipt this Period
523.82

BRM Reimbursement

SUBTOTAL of Receipts This Page (optional) ► **1618.67**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 110
(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

A. Full Name (Last, First, Middle Initial)
United States Treasury

Mailing Address

City State Zip Code
Austin TX

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1814.62

Date of Receipt

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

Transaction ID: SA15.36899

Amount of Each Receipt this Period
78.44

Refund of overpmt

B. Full Name (Last, First, Middle Initial)
United States Treasury

Mailing Address

City State Zip Code
Austin TX

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1864.88

Date of Receipt

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

Transaction ID: SA15.36900

Amount of Each Receipt this Period
50.26

Refund of Overpmt

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

Mailing Address PO Box 830

City State Zip Code
Wisconsin Dells WI 53965

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	0	8

Transaction ID: SA15.36882

Amount of Each Receipt this Period
1000.00

Refund of deposit

SUBTOTAL of Receipts This Page (optional) ► **1128.70**

TOTAL This Period (last page this line number only) ► **2747.37**

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) American Express Merchant Services	Transaction ID: SB21B.36605 Date of Disbursement
	Mailing Address PO Box 53852	<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee	<input type="text" value="4.50"/>
	Candidate Name	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) American Express Merchant Services	Transaction ID: SB21B.36606 Date of Disbursement
	Mailing Address PO Box 53852	<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee	<input type="text" value="3.55"/>
	Candidate Name	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) American Express Merchant Services	Transaction ID: SB21B.36627 Date of Disbursement
	Mailing Address PO Box 53852	<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee	<input type="text" value="4.95"/>
	Candidate Name	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="13.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

PAGE 29 / 110

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) American Express Merchant Services	Transaction ID: SB21B.36630 Date of Disbursement																			
	Mailing Address PO Box 53852	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	2	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	2	/	2	0	0	8												
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit card processing fee	<table border="1"><tr><td>0.89</td></tr></table>	0.89																		
0.89																					
	Candidate Name	Category/ Type																			
	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) ▼																			

B.	Full Name (Last, First, Middle Initial) CD Inc.	Transaction ID: SB21B.36590 Date of Disbursement																			
	Mailing Address PO Box 1877	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	5	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	2	5	/	2	0	0	8												
	City Alexandria State VA Zip Code 22313	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Internet ads	<table border="1"><tr><td>412.56</td></tr></table>	412.56																		
412.56																					
	Candidate Name	Category/ Type																			
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) Dell Catalog Sales L.P.	Transaction ID: SB21B.36674 Date of Disbursement																			
	Mailing Address Box 676032	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	3	0	/	2	0	0	8												
	City Dallas State TX Zip Code 75267	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Server	<table border="1"><tr><td>5113.89</td></tr></table>	5113.89																		
5113.89																					
	Candidate Name	Category/ Type																			
	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) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>5527.34</td></tr></table>	5527.34
5527.34		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

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)

PAGE 30 / 110

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Domino's Pizza - La Crosse <hr/> Mailing Address 2402 State Rd <hr/> City LaCrosse State WI Zip Code 54601 <hr/> Purpose of Disbursement 11/26 Fadness reimbursement: pizza Candidate Name Category/ Type <hr/> 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:	Transaction ID: SB21B.36821 Date of Disbursement 10 / 21 / 2008	Amount of Each Disbursement this Period 22.41 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Domino's Pizza - La Crosse <hr/> Mailing Address 2402 State Rd <hr/> City LaCrosse State WI Zip Code 54601 <hr/> Purpose of Disbursement 11/26 Fadness reimbursement: pizza Candidate Name Category/ Type <hr/> 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:	Transaction ID: SB21B.36818 Date of Disbursement 11 / 02 / 2008	Amount of Each Disbursement this Period 39.98 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Domino's Pizza - La Crosse <hr/> Mailing Address 2402 State Rd <hr/> City LaCrosse State WI Zip Code 54601 <hr/> Purpose of Disbursement 11/26 Fadness reimbursement: pizza Candidate Name Category/ Type <hr/> 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:	Transaction ID: SB21B.36820 Date of Disbursement 11 / 03 / 2008	Amount of Each Disbursement this Period 69.25 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) eDonation.com	Transaction ID: SB21B.36621 Date of Disbursement
	Mailing Address 118 North Saint Asaph St.	<input type="text" value="11"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement e-donation fee	<input type="text" value="35.79"/>
	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:	

B.	Full Name (Last, First, Middle Initial) eDonation.com	Transaction ID: SB21B.36626 Date of Disbursement
	Mailing Address 118 North Saint Asaph St.	<input type="text" value="12"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement e-donation fee	<input type="text" value="4.71"/>
	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:	

C.	Full Name (Last, First, Middle Initial) Executive Travel Associates	Transaction ID: SB21B.36901 Date of Disbursement
	Mailing Address 1333 New Hampshire Ave NW Suite 701	<input type="text" value="09"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement 11/25 T.Thompson Expenses: Airfare	<input type="text" value="1026.00"/>
	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:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="40.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A. Full Name (Last, First, Middle Initial) Executive Travel Associates</p> <p>Mailing Address 1333 New Hampshire Ave NW Suite 701</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement 11/25 T.Thompson Expenses: airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36903</p> <p>Date of Disbursement 10 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 2640.50</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Joe Fadness</p> <p>Mailing Address 720 N Old World 3rd St</p> <p>City Milwaukee State WI Zip Code 53203</p> <p>Purpose of Disbursement Expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36740</p> <p>Date of Disbursement 11 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 484.43</p>
<p>C. Full Name (Last, First, Middle Initial) Joe Fadness</p> <p>Mailing Address 720 N Old World 3rd St</p> <p>City Milwaukee State WI Zip Code 53203</p> <p>Purpose of Disbursement Mileage reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36743</p> <p>Date of Disbursement 12 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 85.68</p>

SUBTOTAL of Disbursements This Page (optional) ▶

570.11

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

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: SB21B.36793 Date of Disbursement 11 / 12 / 2008
	Mailing Address PO Box 1140	Amount of Each Disbursement this Period 15.55
	City Memphis State TN Zip Code 38101	
	Purpose of Disbursement 12/30 CC Pmt: shipping	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) George Webb	Transaction ID: SB21B.36805 Date of Disbursement 08 / 04 / 2008
	Mailing Address 19555 W Bluemound Rd	Amount of Each Disbursement this Period 10.05
	City Brookfield State WI Zip Code 53045	
	Purpose of Disbursement 12/15 Trovato reimbursement: food	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Laura Galton	Transaction ID: SB21B.36717 Date of Disbursement 12 / 10 / 2008
	Mailing Address N24 W30440 Crystal Springs Dr.	Amount of Each Disbursement this Period 5000.00
	City Pewaukee State WI Zip Code 53072	
	Purpose of Disbursement Fundraising consulting	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Hammond Greetings	Transaction ID: SB21B.36797 Date of Disbursement																			
	Mailing Address 147 W Election Rd, Ste 200	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	8												
	City Draper State UT Zip Code 84020	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 12/30 CC Pmt: Cards	<table border="1"><tr><td>646.73</td></tr></table>	646.73																		
646.73																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Heinzen Printing Inc.	Transaction ID: SB21B.36593 Date of Disbursement																			
	Mailing Address P.O. Box 267	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	5		2	0	0	8												
	City Marshfield State WI Zip Code 54449	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Envelope Printing	<table border="1"><tr><td>1230.30</td></tr></table>	1230.30																		
1230.30																					
	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:																				

C.	Full Name (Last, First, Middle Initial) Juston Johnson	Transaction ID: SB21B.36655 Date of Disbursement																			
	Mailing Address 820 Williamson Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	8												
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Expense/Mileage reimbursement	<table border="1"><tr><td>94.80</td></tr></table>	94.80																		
94.80																					
	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:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1325.10</td></tr></table>	1325.10
1325.10		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Krystal Kastle of Alaska	Transaction ID: SB21B.36794 Date of Disbursement
	Mailing Address PO Box 242442	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Anchorage State AK Zip Code 99524	Amount of Each Disbursement this Period
	Purpose of Disbursement 12/30 CC Pmt: Crystal Elephants	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Krystal Kastle of Alaska	Transaction ID: SB21B.36796 Date of Disbursement
	Mailing Address PO Box 242442	<input type="text" value="11"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Anchorage State AK Zip Code 99524	Amount of Each Disbursement this Period
	Purpose of Disbursement 12/30 CC Pmt: Crystal elephants	<input type="text" value="280.00"/>
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center	Transaction ID: SB21B.36671 Date of Disbursement
	Mailing Address PO Box 3052	<input type="text" value="12"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Milwaukee State WI Zip Code 53201	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card payment	<input type="text" value="1615.21"/>
	Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1615.21"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A. Full Name (Last, First, Middle Initial)
M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.36567

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

45.00

B. Full Name (Last, First, Middle Initial)
M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.36607

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

179.80

C. Full Name (Last, First, Middle Initial)
M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.36726

Date of Disbursement

11 / 25 / 2008

Amount of Each Disbursement this Period

302.00

SUBTOTAL of Disbursements This Page (optional) ►

526.80

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

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.36737
	Mailing Address P.O. Box 5920	Date of Disbursement 11 / 25 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 355.00
	Purpose of Disbursement Bank fee	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.36622
	Mailing Address P.O. Box 5920	Date of Disbursement 11 / 30 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 88.11
	Purpose of Disbursement Interest on LOC	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.36568
	Mailing Address P.O. Box 5920	Date of Disbursement 12 / 11 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 45.00
	Purpose of Disbursement Bank Fee	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	488.11
TOTAL This Period (last page this line number only)	

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A. Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin <hr/> Mailing Address P.O. Box 5920 <hr/> City Madison State WI Zip Code 53705 <hr/> Purpose of Disbursement Bank fee Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.36629 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 217.07
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin <hr/> Mailing Address P.O. Box 5920 <hr/> City Madison State WI Zip Code 53705 <hr/> Purpose of Disbursement Bank fee Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.36732 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 65.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin <hr/> Mailing Address P.O. Box 5920 <hr/> City Madison State WI Zip Code 53705 <hr/> Purpose of Disbursement Bank fee Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.36765 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 45.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	327.07
TOTAL This Period (last page this line number only) ▶	_____

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.36712
	Mailing Address P.O. Box 5920	Date of Disbursement 12 / 31 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 91.43
	Purpose of Disbursement Interest on LOC	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.36604
	Mailing Address P.O. Box 5920	Date of Disbursement 11 / 25 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 760.87
	Purpose of Disbursement Credit card processing fee	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.36715
	Mailing Address P.O. Box 5920	Date of Disbursement 11 / 25 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 21.63
	Purpose of Disbursement Credit card processing fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	873.93
TOTAL This Period (last page this line number only)	

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.36628
	Mailing Address P.O. Box 5920	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 337.27
	Purpose of Disbursement Credit card processing fee	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.36718
	Mailing Address P.O. Box 5920	Date of Disbursement MM / DD / YYYY 12 / 10 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 12.95
	Purpose of Disbursement Credit card processing fee	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.36792
	Mailing Address #774100, 4100 Solutions Center	Date of Disbursement MM / DD / YYYY 11 / 12 / 2008
	City Chicago State IL Zip Code 60677-4001	Amount of Each Disbursement this Period 19.95
	Purpose of Disbursement 12/30 CC Pmt: cc processing fees	Category/ Type
	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) ▼	[MEMO ITEM]
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	350.22
TOTAL This Period (last page this line number only)	

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A. Full Name (Last, First, Middle Initial) PostMaster <hr/> Mailing Address PO Box 7005 <hr/> City Madison State WI Zip Code 53707 <hr/> Purpose of Disbursement Bulk Mail Permit Fee Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.36595 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 180.00
	Category/Type
	Category/Type

B. Full Name (Last, First, Middle Initial) PostMaster <hr/> Mailing Address PO Box 7005 <hr/> City Madison State WI Zip Code 53707 <hr/> Purpose of Disbursement Stamps Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.36624 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 8
	Amount of Each Disbursement this Period 210.00
	Category/Type
	Category/Type

C. Full Name (Last, First, Middle Initial) PostMaster <hr/> Mailing Address PO Box 7005 <hr/> City Madison State WI Zip Code 53707 <hr/> Purpose of Disbursement Business reply mail postage Candidate Name <hr/> 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) ▼	Transaction ID: SB21B.36654 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1390.00
TOTAL This Period (last page this line number only) ▶	[]

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Kate Proctor	Transaction ID: SB21B.36816 Date of Disbursement 11 / 02 / 2008
	Mailing Address 1501 Cass St	Amount of Each Disbursement this Period 198.70
	City LaCrosse State WI Zip Code 54601	
	Purpose of Disbursement 11/26 Fadness reimbursement: food Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Purchase Power	Transaction ID: SB21B.36705 Date of Disbursement 12 / 31 / 2008
	Mailing Address Po Box 856042	Amount of Each Disbursement this Period 2000.00
	City Louisville State KY Zip Code 40285	
	Purpose of Disbursement Postage for meter Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) RMA Chauffeured Transportation	Transaction ID: SB21B.36904 Date of Disbursement 10 / 20 / 2008
	Mailing Address 6010 Executive Blvd #101	Amount of Each Disbursement this Period 952.90
	City Rockville State MD Zip Code 20852	
	Purpose of Disbursement 11/25 T.Thompson Expenses:Transportation Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Sprizzo Gallery Caffe	Transaction ID: SB21B.36803
	Mailing Address 378 W Main St	Date of Disbursement 09 / 08 / 2008
	City Waukesha State WI Zip Code 53186	Amount of Each Disbursement this Period 8.65
	Purpose of Disbursement 12/15 Trovato reimbursement: food	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Sunny's Executive Sedan Service, Inc.	Transaction ID: SB21B.36906
	Mailing Address 5252 Cherokee Ave #220	Date of Disbursement 10 / 28 / 2008
	City Alexandria State VA Zip Code 22312	Amount of Each Disbursement this Period 380.60
	Purpose of Disbursement 11/25 T.Thompson Expenses:Transportation	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) The Champion Group	Transaction ID: SB21B.36716
	Mailing Address 6652 Offshore Drive	Date of Disbursement 12 / 08 / 2008
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Political consulting	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

Full Name (Last, First, Middle Initial)
The Champion Group

Transaction ID: SB21B.36719
Date of Disbursement

Mailing Address 6652 Offshore Drive

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

City Madison State WI Zip Code 53705

Amount of Each Disbursement this Period

Purpose of Disbursement
Political consulting

Category/ Type

3000.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Tommy Thompson

Transaction ID: SB21B.36569
Date of Disbursement

Mailing Address 609 Academy St

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

City Elroy State WI Zip Code 53929

Amount of Each Disbursement this Period

Purpose of Disbursement
Expense reimbursement

Category/ Type

5000.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Tony's Instant Litho Printing

Transaction ID: SB21B.36708
Date of Disbursement

Mailing Address 2249 Sherman Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	8

City Madison State WI Zip Code 53704

Amount of Each Disbursement this Period

Purpose of Disbursement
Form printing

Category/ Type

1196.54

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

9196.54

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

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**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.36601 Date of Disbursement 11 / 25 / 2008
	Mailing Address 925 Harrington Drive	Amount of Each Disbursement this Period 500.00
	City Madison State WI Zip Code 53718	
	Purpose of Disbursement Quarterly management fee	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.36602 Date of Disbursement 11 / 25 / 2008
	Mailing Address 925 Harrington Drive	Amount of Each Disbursement this Period 7487.15
	City Madison State WI Zip Code 53718	
	Purpose of Disbursement Finance mailing - not FEA	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Unisource Direct	Transaction ID: SB21B.36709 Date of Disbursement 12 / 31 / 2008
	Mailing Address 925 Harrington Drive	Amount of Each Disbursement this Period 1000.00
	City Madison State WI Zip Code 53718	
	Purpose of Disbursement Finance mailing - not FEA	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	8987.15
TOTAL This Period (last page this line number only)	

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A. Full Name (Last, First, Middle Initial) Unisource Direct</p> <p>Mailing Address 925 Harrington Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Finance mailing - not FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36710</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 7980.83</p>
<p>B. Full Name (Last, First, Middle Initial) Unisource Direct</p> <p>Mailing Address 925 Harrington Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Finance mailing - not FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36711</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p>
<p>C. Full Name (Last, First, Middle Initial) UPS Store LaCrosse</p> <p>Mailing Address 317 4th St S</p> <p>City La Crosse State WI Zip Code 54301</p> <p>Purpose of Disbursement 11/26 Fadness reimbursement: shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36822</p> <p>Date of Disbursement 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 154.09</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10980.83

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

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Walmart</p> <p>Mailing Address 4198 Nakoosa Trail</p> <p>City Madison State WI Zip Code 53714</p> <p>Purpose of Disbursement 12/30 CC Pmt: Office fridge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36799</p> <p>Date of Disbursement 12 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 152.98</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Wilderness Resort</p> <p>Mailing Address PO Box 830</p> <p>City Wisconsin Dells State WI Zip Code 53965</p> <p>Purpose of Disbursement Cabin deposit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36570</p> <p>Date of Disbursement 11 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue - Sls Tax</p> <p>Mailing Address PO Box 93389</p> <p>City Milwaukee State WI Zip Code 53293</p> <p>Purpose of Disbursement Sales/Use Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.36620</p> <p>Date of Disbursement 11 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 665.78</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>1665.78</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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)

PAGE 48 / 110

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

Full Name (Last, First, Middle Initial)
Wisc. Dept of Revenue - Sls Tax

Mailing Address PO Box 93389

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement

Sales/Use tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.36673

Date of Disbursement

12 / 30 / 2008

Amount of Each Disbursement this Period

100.63

SUBTOTAL of Disbursements This Page (optional)

100.63

TOTAL This Period (last page this line number only)

52978.32

**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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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A. Full Name (Last, First, Middle Initial) RNC Mailing Address 310 First Street SE City Washington State DC Zip Code 20003 Purpose of Disbursement Transfer 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) ▼	Transaction ID: SB22.36731 Date of Disbursement 12 / 03 / 2008
	Amount of Each Disbursement this Period 272000.00
B. Full Name (Last, First, Middle Initial) RNC Mailing Address 310 First Street SE City Washington State DC Zip Code 20003 Purpose of Disbursement Transfer 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) ▼	Transaction ID: SB22.36751 Date of Disbursement 12 / 03 / 2008
	Amount of Each Disbursement this Period 68000.00

SUBTOTAL of Disbursements This Page (optional) ▶

340000.00

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

340000.00

**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)

PAGE 50 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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

A. Full Name (Last, First, Middle Initial)
M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement
Payoff of LOC

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB26.36713
Date of Disbursement

12 / 30 / 2008

Amount of Each Disbursement this Period

2843.70

B. Full Name (Last, First, Middle Initial)
M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement
Payoff of LOC

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB26.36714
Date of Disbursement

12 / 30 / 2008

Amount of Each Disbursement this Period

23700.00

SUBTOTAL of Disbursements This Page (optional)

26543.70

TOTAL This Period (last page this line number only)

26543.70

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.36603
	Mailing Address PO Box 6164	Date of Disbursement 11 / 25 / 2008
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period 820.61
	Purpose of Disbursement Employee simple IRA	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.36657
	Mailing Address PO Box 6164	Date of Disbursement 12 / 15 / 2008
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period 892.51
	Purpose of Disbursement Employee simple IRA	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.36676
	Mailing Address PO Box 6164	Date of Disbursement 12 / 30 / 2008
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period 961.44
	Purpose of Disbursement Employee simple IRA	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2674.56
TOTAL This Period (last page this line number only)	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Americinn of Madison	Transaction ID: SB30B.36845 Date of Disbursement 11 / 05 / 2008
	Mailing Address 101 W Broadway	Amount of Each Disbursement this Period 3088.20
	City Monona State WI Zip Code 53716	
	Purpose of Disbursement 12/3 CC Pmt: 72hr hotel	[MEMO ITEM]
	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) ▼	

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB30B.36742 Date of Disbursement 12 / 01 / 2008
	Mailing Address PO Box 9100	Amount of Each Disbursement this Period 291.02
	City Aurora State IL Zip Code 60507	
	Purpose of Disbursement VoIP Phone bill	[MEMO ITEM]
	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) ▼	

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB30B.36750 Date of Disbursement 12 / 02 / 2008
	Mailing Address PO Box 9100	Amount of Each Disbursement this Period 644.79
	City Aurora State IL Zip Code 60507	
	Purpose of Disbursement Phone bill	[MEMO ITEM]
	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) ▼	

SUBTOTAL of Disbursements This Page (optional)	935.81
TOTAL This Period (last page this line number only)	

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

Full Name (Last, First, Middle Initial)
AT&T

Mailing Address PO Box 9100

City Aurora State IL Zip Code 60507

Purpose of Disbursement
Phone bill

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB30B.36761
Date of Disbursement

12 / 09 / 2008

Amount of Each Disbursement this Period

166.54

B.

Full Name (Last, First, Middle Initial)
Bartz's Party Store

Mailing Address 4150 S 108th

City Greenfield State WI Zip Code 53220

Purpose of Disbursement
11/25 Kuehn Reimbursement: supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB30B.36774
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

10.19

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Beloit Properties

Mailing Address 655 Third St

City Beloit State WI Zip Code 53511

Purpose of Disbursement
12/5 Rock Co GOP reimbursement:utilities

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB30B.36847
Date of Disbursement

12 / 04 / 2008

Amount of Each Disbursement this Period

252.76

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

166.54

TOTAL This Period (last page this line number only)

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Best Western Hudson House	Transaction ID: SB30B.36758 Date of Disbursement
	Mailing Address 1616 Crestview Dr	<input type="text" value="12"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Hudson State WI Zip Code 54016	Amount of Each Disbursement this Period
	Purpose of Disbursement 72-hr deployment hotel	<input type="text" value="928.65"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Best Western La Crosse	Transaction ID: SB30B.36841 Date of Disbursement
	Mailing Address 1835 Rose St	<input type="text" value="11"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City LaCrosse State WI Zip Code 54601	Amount of Each Disbursement this Period
	Purpose of Disbursement 12/3 CC Pmt: 72hr hotel	<input type="text" value="1271.04"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Dudley Bowlby	Transaction ID: SB30B.36608 Date of Disbursement
	Mailing Address 250 Femrite Drive	<input type="text" value="11"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Madison State WI Zip Code 53716	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="447.99"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1376.64"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Dudley Bowlby	Transaction ID: SB30B.36642 Date of Disbursement
	Mailing Address 250 Femrite Drive	<input type="text" value="12"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Madison State WI Zip Code 53716	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="801.10"/>
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Dudley Bowlby	Transaction ID: SB30B.36690 Date of Disbursement
	Mailing Address 250 Femrite Drive	<input type="text" value="12"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Madison State WI Zip Code 53716	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="424.54"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) BP Gasoline - Wausau	Transaction ID: SB30B.36825 Date of Disbursement
	Mailing Address 4600 Rib Mountain Dr	<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Wausau State WI Zip Code 54401	Amount of Each Disbursement this Period
	Purpose of Disbursement 11/25 Gilbert reimbursement: gas	<input type="text" value="44.85"/>
	Candidate Name	Category/Type
	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Matthew Brabender	Transaction ID: SB30B.36609
	Mailing Address 3914 Rieder Road #1	Date of Disbursement MM / DD / YYYY 11 / 26 / 2008
	City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period 377.25
	Purpose of Disbursement Payroll	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Matthew Brabender	Transaction ID: SB30B.36643
	Mailing Address 3914 Rieder Road #1	Date of Disbursement MM / DD / YYYY 12 / 15 / 2008
	City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period 589.44
	Purpose of Disbursement Payroll	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Matthew Brabender	Transaction ID: SB30B.36691
	Mailing Address 3914 Rieder Road #1	Date of Disbursement MM / DD / YYYY 12 / 31 / 2008
	City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period 333.43
	Purpose of Disbursement Payroll	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1300.12
TOTAL This Period (last page this line number only)	▶	

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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

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

Transaction ID: SB30B.36610
Date of Disbursement

Mailing Address 8570 Greenway Blvd #209

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

City Middleton State WI Zip Code 53562

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

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

Transaction ID: SB30B.36644
Date of Disbursement

Mailing Address 8570 Greenway Blvd #209

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

City Middleton State WI Zip Code 53562

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB30B.36692
Date of Disbursement

Mailing Address 8570 Greenway Blvd #209

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

City Middleton State WI Zip Code 53562

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

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

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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A. Full Name (Last, First, Middle Initial) Charter Communications</p> <p>Mailing Address 135 South LaSalle Street Dept 8123</p> <p>City Chicago State IL Zip Code 60674</p> <p>Purpose of Disbursement Cable</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36749</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="114.44"/></p>
<p>B. Full Name (Last, First, Middle Initial) Molly Christianson</p> <p>Mailing Address 5133 Woodfield Dr.</p> <p>City Carmel State IN Zip Code 46033</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36572</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="53.67"/></p>
<p>C. Full Name (Last, First, Middle Initial) Molly Christianson</p> <p>Mailing Address 5133 Woodfield Dr.</p> <p>City Carmel State IN Zip Code 46033</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36631</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="84.86"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="252.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Molly Christianson	Transaction ID: SB30B.36677 Date of Disbursement 12 / 31 / 2008
	Mailing Address 5133 Woodfield Dr.	Amount of Each Disbursement this Period 48.48
	City Carmel State IN Zip Code 46033	
	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:	

B.	Full Name (Last, First, Middle Initial) Comfort Suites Appleton	Transaction ID: SB30B.36834 Date of Disbursement 11 / 06 / 2008
	Mailing Address 3809 W Wisconsin Ave	Amount of Each Disbursement this Period 3742.97
	City Appleton State WI Zip Code 54914	
	Purpose of Disbursement 12/3 CC Pmt: 72hr hotel	
	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:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Dean Care	Transaction ID: SB30B.36584 Date of Disbursement 11 / 25 / 2008
	Mailing Address PO Box 88610	Amount of Each Disbursement this Period 3085.83
	City Milwaukee State WI Zip Code 53288	
	Purpose of Disbursement Health Insurance	
	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:	

SUBTOTAL of Disbursements This Page (optional)	3134.31
TOTAL This Period (last page this line number only)	

**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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Dean Care	Transaction ID: SB30B.36669 Date of Disbursement 12 / 30 / 2008
	Mailing Address PO Box 88610	Amount of Each Disbursement this Period 3085.83
	City Milwaukee State WI Zip Code 53288	
	Purpose of Disbursement Health insurance	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Delta Dental	Transaction ID: SB30B.36585 Date of Disbursement 11 / 25 / 2008
	Mailing Address PO Box 828	Amount of Each Disbursement this Period 433.69
	City Stevens Point State WI Zip Code 54481	
	Purpose of Disbursement Dental Insurance	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Delta Dental	Transaction ID: SB30B.36670 Date of Disbursement 12 / 30 / 2008
	Mailing Address PO Box 828	Amount of Each Disbursement this Period 433.69
	City Stevens Point State WI Zip Code 54481	
	Purpose of Disbursement Dental insurance	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	3953.21
TOTAL This Period (last page this line number only)	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.36611 Date of Disbursement MM / DD / YYYY 11 / 26 / 2008
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 989.20
	City Madison State WI Zip 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:	

B.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.36645 Date of Disbursement MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 1017.89
	City Madison State WI Zip 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:	

C.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.36658 Date of Disbursement MM / DD / YYYY 12 / 17 / 2008
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 2346.91
	City Madison State WI Zip 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:	

SUBTOTAL of Disbursements This Page (optional)	▶	4354.00
TOTAL This Period (last page this line number only)	▶	

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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.36693 Date of Disbursement 12 / 31 / 2008
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 1083.10
	City Madison State WI Zip 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:	

B.	Full Name (Last, First, Middle Initial) Sarah J Duncan	Transaction ID: SB30B.36573 Date of Disbursement 11 / 25 / 2008
	Mailing Address 420 N Carroll St	Amount of Each Disbursement this Period 95.24
	City Madison State WI Zip 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:	

C.	Full Name (Last, First, Middle Initial) Sarah J Duncan	Transaction ID: SB30B.36632 Date of Disbursement 12 / 15 / 2008
	Mailing Address 420 N Carroll St	Amount of Each Disbursement this Period 122.67
	City Madison State WI Zip 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:	

SUBTOTAL of Disbursements This Page (optional)	▶	1301.01
TOTAL This Period (last page this line number only)	▶	

**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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Sarah J Duncan	Transaction ID: SB30B.36678 Date of Disbursement 12 / 31 / 2008
	Mailing Address 420 N Carroll St	Amount of Each Disbursement this Period 29.44
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Econo Lodge La Crosse	Transaction ID: SB30B.36835 Date of Disbursement 11 / 05 / 2008
	Mailing Address 1906 Rose St	Amount of Each Disbursement this Period 1436.14
	City LaCrosse State WI Zip Code 54601	
	Purpose of Disbursement 12/3 CC Pmt: 72hr hotel	
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Econo Lodge La Crosse	Transaction ID: SB30B.36840 Date of Disbursement 11 / 06 / 2008
	Mailing Address 1906 Rose St	Amount of Each Disbursement this Period 48.49
	City LaCrosse State WI Zip Code 54601	
	Purpose of Disbursement 12/3 CC Pmt: 72hr hotel	
	Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	29.44
TOTAL This Period (last page this line number only)	▶	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Extended Stay Waukesha Mailing Address 2520 Plaza Court City Waukesha State WI Zip Code 53186 Purpose of Disbursement 12/3 CC Pmt: hotel credit 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) ▼	Transaction ID: SB30B.36839 Date of Disbursement 11 / 06 / 2008 Amount of Each Disbursement this Period -121.37 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Joe Fadness Mailing Address 720 N Old World 3rd St City Milwaukee State WI Zip Code 53203 Purpose of Disbursement Payroll 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) ▼	Transaction ID: SB30B.36747 Date of Disbursement 12 / 02 / 2008 Amount of Each Disbursement this Period 1127.64
C.	Full Name (Last, First, Middle Initial) Joe Fadness Mailing Address 720 N Old World 3rd St City Milwaukee State WI Zip Code 53203 Purpose of Disbursement Payroll 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) ▼	Transaction ID: SB30B.36668 Date of Disbursement 12 / 22 / 2008 Amount of Each Disbursement this Period 2043.79

SUBTOTAL of Disbursements This Page (optional) ▶	3171.43
TOTAL This Period (last page this line number only) ▶	

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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

Full Name (Last, First, Middle Initial)
FedEx

Transaction ID: SB30B.36763
Date of Disbursement

Mailing Address PO Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	0	8

City State Zip Code
Memphis TN 38101

Amount of Each Disbursement this Period

391.33

Purpose of Disbursement
Shipping

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Flannerys

Transaction ID: SB30B.36811
Date of Disbursement

Mailing Address 425 E Wells

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

City State Zip Code
Milwaukee WI 53202

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement
12/15 Trovato reimbursement: Food

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Transaction ID: SB30B.36746
Date of Disbursement

Mailing Address 7300 Hudson Blvd #270

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

City State Zip Code
St. Paul MN 55128

Amount of Each Disbursement this Period

398.60

Purpose of Disbursement
Conference calls

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

789.93

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

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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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) George Webb</p> <p>Mailing Address 19555 W Bluemound Rd</p> <p>City Brookfield State WI Zip Code 53045</p> <p>Purpose of Disbursement 12/15 Trovato reimbursement: food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36812</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 18.45</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Peter Gilbert</p> <p>Mailing Address 4823 N Iroquois Ave</p> <p>City Glendale State WI Zip Code 53217</p> <p>Purpose of Disbursement Expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36733</p> <p>Date of Disbursement 11 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1229.93</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Hampton Inn Green Bay</p> <p>Mailing Address 2840 Ramada Way</p> <p>City Green Bay State WI Zip Code 54304</p> <p>Purpose of Disbursement 12/3 CC Pmt: 72hr hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36838</p> <p>Date of Disbursement 11 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 3216.72</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1229.93

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

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A. Full Name (Last, First, Middle Initial) Donna Heimbach <hr/> Mailing Address 3002 Dianne Drive <hr/> City Middleton State WI Zip Code 53562 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.36612 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 493.40
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Donna Heimbach <hr/> Mailing Address 3002 Dianne Drive <hr/> City Middleton State WI Zip Code 53562 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.36646 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 702.50
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Donna Heimbach <hr/> Mailing Address 3002 Dianne Drive <hr/> City Middleton State WI Zip Code 53562 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.36694 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 114.73
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1310.63
TOTAL This Period (last page this line number only) ▶	[]

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) HiLife Investments	Transaction ID: SB30B.36767
	Mailing Address PO Box 999	Date of Disbursement MM / DD / YYYY 12 / 23 / 2008
	City Stevens Point State WI Zip Code 54481	Amount of Each Disbursement this Period 631.47
	Purpose of Disbursement Electric bill	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) IRS	Transaction ID: SB30B.36618
	Mailing Address Payment Center	Date of Disbursement MM / DD / YYYY 11 / 26 / 2008
	City Kansas City State MO Zip Code 64999	Amount of Each Disbursement this Period 5558.14
	Purpose of Disbursement Payroll Tax	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) IRS	Transaction ID: SB30B.36738
	Mailing Address Payment Center	Date of Disbursement MM / DD / YYYY 11 / 26 / 2008
	City Kansas City State MO Zip Code 64999	Amount of Each Disbursement this Period 302.24
	Purpose of Disbursement Payroll tax	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	6491.85
TOTAL This Period (last page this line number only)	▶	

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) IRS	Transaction ID: SB30B.36652
	Mailing Address Payment Center	Date of Disbursement 12 / 15 / 2008
	City Kansas City State MO Zip Code 64999	Amount of Each Disbursement this Period 6194.66
	Purpose of Disbursement Payroll tax	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) IRS	Transaction ID: SB30B.36688
	Mailing Address Payment Center	Date of Disbursement 12 / 31 / 2008
	City Kansas City State MO Zip Code 64999	Amount of Each Disbursement this Period 16364.50
	Purpose of Disbursement Payroll tax	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Mark Jefferson	Transaction ID: SB30B.36574
	Mailing Address 1678 Cottonville Avenue	Date of Disbursement 11 / 25 / 2008
	City Arkdale State WI Zip Code 54613	Amount of Each Disbursement this Period 2229.49
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ► **24788.65**

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Mark Jefferson	Transaction ID: SB30B.36633 Date of Disbursement 12 / 15 / 2008
	Mailing Address 1678 Cottonville Avenue	Amount of Each Disbursement this Period 2229.48
	City Arkdale State WI Zip Code 54613	
	Purpose of Disbursement Payroll	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Mark Jefferson	Transaction ID: SB30B.36679 Date of Disbursement 12 / 31 / 2008
	Mailing Address 1678 Cottonville Avenue	Amount of Each Disbursement this Period 6261.28
	City Arkdale State WI Zip Code 54613	
	Purpose of Disbursement Payroll	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Juston Johnson	Transaction ID: SB30B.36659 Date of Disbursement 12 / 17 / 2008
	Mailing Address 820 Williamson Street	Amount of Each Disbursement this Period 1678.16
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10168.92
TOTAL This Period (last page this line number only)	▶	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) KFC - Burlington	Transaction ID: SB30B.36789 Date of Disbursement 10 / 22 / 2008
	Mailing Address 1084 Milwaukee Ave	Amount of Each Disbursement this Period 32.83
	City Burlington State WI Zip Code 53105	
	Purpose of Disbursement 11/25 Kuehn Reimbursement: food	[MEMO ITEM]
	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) ▼	

B.	Full Name (Last, First, Middle Initial) Brian Kind	Transaction ID: SB30B.36575 Date of Disbursement 11 / 25 / 2008
	Mailing Address 405 Doral Court	Amount of Each Disbursement this Period 1686.79
	City Waunakee State WI Zip Code 53597	
	Purpose of Disbursement Payroll	[MEMO ITEM]
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Brian Kind	Transaction ID: SB30B.36634 Date of Disbursement 12 / 15 / 2008
	Mailing Address 405 Doral Court	Amount of Each Disbursement this Period 1686.80
	City Waunakee State WI Zip Code 53597	
	Purpose of Disbursement Payroll	[MEMO ITEM]
	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) ▼	

SUBTOTAL of Disbursements This Page (optional)	3373.59
TOTAL This Period (last page this line number only)	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Brian Kind	Transaction ID: SB30B.36660
	Mailing Address 405 Doral Court	Date of Disbursement 12 / 17 / 2008
	City Waunakee State WI Zip Code 53597	Amount of Each Disbursement this Period 895.19
	Purpose of Disbursement Payroll	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Brian Kind	Transaction ID: SB30B.36680
	Mailing Address 405 Doral Court	Date of Disbursement 12 / 31 / 2008
	City Waunakee State WI Zip Code 53597	Amount of Each Disbursement this Period 1686.80
	Purpose of Disbursement Payroll	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Josh Kuehn	Transaction ID: SB30B.36735
	Mailing Address 296 W State St	Date of Disbursement 11 / 25 / 2008
	City Burlington State WI Zip Code 53105	Amount of Each Disbursement this Period 373.92
	Purpose of Disbursement Expense reimbursement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2955.91
TOTAL This Period (last page this line number only)	

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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Kirsten Kukowski</p> <p>Mailing Address 3029 Maple Valley Drive #201</p> <p>City Madison State WI Zip Code 53719</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36576</p> <p>Date of Disbursement 11 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1318.32</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Kirsten Kukowski</p> <p>Mailing Address 3029 Maple Valley Drive #201</p> <p>City Madison State WI Zip Code 53719</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36635</p> <p>Date of Disbursement 12 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1278.32</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kirsten Kukowski</p> <p>Mailing Address 3029 Maple Valley Drive #201</p> <p>City Madison State WI Zip Code 53719</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36661</p> <p>Date of Disbursement 12 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 1604.25</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4200.89

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

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)

PAGE 74 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

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

A.	Full Name (Last, First, Middle Initial) Kirsten Kukowski	Transaction ID: SB30B.36681 Date of Disbursement 12 / 31 / 2008
	Mailing Address 3029 Maple Valley Drive #201	Amount of Each Disbursement this Period 1318.32
	City Madison State WI Zip Code 53719	
	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:	

B.	Full Name (Last, First, Middle Initial) La Quinta Inns Oshkosh	Transaction ID: SB30B.36843 Date of Disbursement 11 / 07 / 2008
	Mailing Address 1950 Omro Rd	Amount of Each Disbursement this Period 2142.45
	City Oshkosh State WI Zip Code 54902	
	Purpose of Disbursement 12/3 CC Pmt: 72hr hotel	
	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:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Larry Loomis	Transaction ID: SB30B.36613 Date of Disbursement 11 / 26 / 2008
	Mailing Address 3157 Muir Field Road #47	Amount of Each Disbursement this Period 311.70
	City Madison State WI Zip Code 53719	
	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:	

SUBTOTAL of Disbursements This Page (optional)	▶	1630.02
TOTAL This Period (last page this line number only)	▶	

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Larry Loomis</p> <p>Mailing Address 3157 Muir Field Road #47</p> <p>City Madison State WI Zip Code 53719</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36647</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="642.92"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Larry Loomis</p> <p>Mailing Address 3157 Muir Field Road #47</p> <p>City Madison State WI Zip Code 53719</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36695</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="366.32"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rebecca L Luft</p> <p>Mailing Address 321 Wisconsin Ave #8</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36577</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="149.74"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

Full Name (Last, First, Middle Initial)
Rebecca L Luft

Transaction ID: SB30B.36636
Date of Disbursement

Mailing Address 321 Wisconsin Ave #8

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

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

232.53

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Rebecca L Luft

Transaction ID: SB30B.36682
Date of Disbursement

Mailing Address 321 Wisconsin Ave #8

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	8

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

111.57

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
M&I Bank Credit Card Processing Center

Transaction ID: SB30B.36730
Date of Disbursement

Mailing Address PO Box 3052

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	8

City Milwaukee State WI Zip Code 53201

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit card payment

16290.08

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

16634.18

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

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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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ryan Mahoney</p> <p>Mailing Address 7608 Hamilton Spring Rd</p> <p>City Bethesda State MD Zip Code 20817</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36578</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="930.04"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ryan Mahoney</p> <p>Mailing Address 7608 Hamilton Spring Rd</p> <p>City Bethesda State MD Zip Code 20817</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36637</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="930.05"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Ryan Mahoney</p> <p>Mailing Address 7608 Hamilton Spring Rd</p> <p>City Bethesda State MD Zip Code 20817</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36662</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="329.61"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2189.70"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

Full Name (Last, First, Middle Initial)
Ryan Mahoney

Transaction ID: SB30B.36683
Date of Disbursement

Mailing Address 7608 Hamilton Spring Rd

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	8

City Bethesda State MD Zip Code 20817

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

930.05

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
MG&E

Transaction ID: SB30B.36764
Date of Disbursement

Mailing Address PO Box 1231

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

City Madison State WI Zip Code 53701

Amount of Each Disbursement this Period

Purpose of Disbursement
Energy bill

302.73

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Ryan Michaels

Transaction ID: SB30B.36579
Date of Disbursement

Mailing Address 1810 W Luzerne Ct

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

City Milwaukee State WI Zip Code 53221

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

267.47

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1500.25

TOTAL This Period (last page this line number only)

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**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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Rachel A Miller Mailing Address 120 Langdon Street City Madison State WI Zip Code 53703 Purpose of Disbursement Payroll 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) ▼	Transaction ID: SB30B.36580 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 8	Amount of Each Disbursement this Period 96.96
B.	Full Name (Last, First, Middle Initial) Rachel A Miller Mailing Address 120 Langdon Street City Madison State WI Zip Code 53703 Purpose of Disbursement Payroll 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) ▼	Transaction ID: SB30B.36638 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 8	Amount of Each Disbursement this Period 107.37
C.	Full Name (Last, First, Middle Initial) Rachel A Miller Mailing Address 120 Langdon Street City Madison State WI Zip Code 53703 Purpose of Disbursement Payroll 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) ▼	Transaction ID: SB30B.36684 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8	Amount of Each Disbursement this Period 27.70

SUBTOTAL of Disbursements This Page (optional)	232.03
TOTAL This Period (last page this line number only)	

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Kathryn Mize</p> <p>Mailing Address 414 N Livingston Street #2</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36581</p> <p>Date of Disbursement 11 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1817.81</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Kathryn Mize</p> <p>Mailing Address 414 N Livingston Street #2</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36639</p> <p>Date of Disbursement 12 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1924.29</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kathryn Mize</p> <p>Mailing Address 414 N Livingston Street #2</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36663</p> <p>Date of Disbursement 12 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 1337.92</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5080.02

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Kathryn Mize	Transaction ID: SB30B.36667
	Mailing Address 414 N Livingston Street #2	Date of Disbursement 12 / 17 / 2008
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 2520.00
	Purpose of Disbursement Reimbursement: Staff bonus gift cards	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Kathryn Mize	Transaction ID: SB30B.36685
	Mailing Address 414 N Livingston Street #2	Date of Disbursement 12 / 31 / 2008
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 1817.81
	Purpose of Disbursement Payroll	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Napoli	Transaction ID: SB30B.36791
	Mailing Address 132 N Pine St	Date of Disbursement 10 / 08 / 2008
	City Burlington State WI Zip Code 53105	Amount of Each Disbursement this Period 58.17
	Purpose of Disbursement 11/25 Kuehn Reimbursement: food	Category/ Type
	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	4337.81
TOTAL This Period (last page this line number only)	

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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A. Full Name (Last, First, Middle Initial) Napoli</p> <p>Mailing Address 132 N Pine St</p> <p>City Burlington State WI Zip Code 53105</p> <p>Purpose of Disbursement 11/25 Kuehn Reimbursement: food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36779</p> <p>Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 58.17</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Office Depot Brookfield</p> <p>Mailing Address 16085 W Bluemound Rd</p> <p>City Brookfield State WI Zip Code 53005</p> <p>Purpose of Disbursement 11/25 Gilbert reimbursement: stamps</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36831</p> <p>Date of Disbursement 10 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 25.20</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Office Depot Madison</p> <p>Mailing Address 4016 E Washington Ave</p> <p>City Madison State WI Zip Code 53704</p> <p>Purpose of Disbursement 11/25 Gilbert reimbursement: paper</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36827</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 971.93</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**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)

PAGE 83 / 110

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Office Depot Milwaukee	Transaction ID: SB30B.36833 Date of Disbursement
	Mailing Address 362 E Capitol Dr	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Milwaukee State WI Zip Code 53212	Amount of Each Disbursement this Period
	Purpose of Disbursement 11/25 Gilbert reimbursement: Toner	<input type="text" value="154.17"/>
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Office Depot West Allis	Transaction ID: SB30B.36829 Date of Disbursement
	Mailing Address 6800 W Greenfield Ave	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City West Allis State WI Zip Code 53214	Amount of Each Disbursement this Period
	Purpose of Disbursement 11/25 Gilbert reimbursement: paper	<input type="text" value="33.78"/>
	Candidate Name	Category/Type
	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) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) OfficeTeam	Transaction ID: SB30B.36724 Date of Disbursement
	Mailing Address 12400 Collections Center Dr	<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Chicago State IL Zip Code 60693	Amount of Each Disbursement this Period
	Purpose of Disbursement Temp services	<input type="text" value="948.30"/>
	Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="948.30"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A. Full Name (Last, First, Middle Initial) Pick 'n Save - Burlington</p> <p>Mailing Address 1120 Milwaukee Ave</p> <p>City Burlington State WI Zip Code 53105</p> <p>Purpose of Disbursement 11/25 Kuehn Reimbursement: Food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36782 Date of Disbursement 10 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 7.80</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Pick 'n Save - Waukesha</p> <p>Mailing Address 220 E Sunset Dr</p> <p>City Waukesha State WI Zip Code 53186</p> <p>Purpose of Disbursement 12/15 Trovato reimbursement: food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36814 Date of Disbursement 08 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 12.57</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Pick 'n Save - Waukesha East</p> <p>Mailing Address 1535 E Moreland Blvd</p> <p>City Waukesha State WI Zip Code 53186</p> <p>Purpose of Disbursement 12/15 Trovato reimbursement: food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36807 Date of Disbursement 09 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 24.55</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A. Full Name (Last, First, Middle Initial) Scott Poole <hr/> Mailing Address 445 West Gilman #202 <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.36614 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 141.47
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Scott Poole <hr/> Mailing Address 445 West Gilman #202 <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.36648 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 351.51
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Scott Poole <hr/> Mailing Address 445 West Gilman #202 <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.36696 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 68.37
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	561.35
TOTAL This Period (last page this line number only) ▶	[]

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Principal Financial Group	Transaction ID: SB30B.36623
	Mailing Address PO Box 10372	Date of Disbursement 12 / 01 / 2008
	City Des Moines State IA Zip Code 50306	Amount of Each Disbursement this Period 321.89
	Purpose of Disbursement Life Insurance	Category/Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Principal Financial Group	Transaction ID: SB30B.36672
	Mailing Address PO Box 10372	Date of Disbursement 12 / 30 / 2008
	City Des Moines State IA Zip Code 50306	Amount of Each Disbursement this Period 249.72
	Purpose of Disbursement Life insurance	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Ramada Plaza Hotel	Transaction ID: SB30B.36837
	Mailing Address 1 North Main St.	Date of Disbursement 11 / 05 / 2008
	City Fond du Lac State WI Zip Code 54935	Amount of Each Disbursement this Period 1465.44
	Purpose of Disbursement 12/3 CC Pmt: 72hr hotel	Category/Type
	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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	571.61
TOTAL This Period (last page this line number only)	

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A. Full Name (Last, First, Middle Initial) ReproTech, Inc.</p> <p>Mailing Address 7346 W State St</p> <p>City Wauwatosa State WI Zip Code 53213</p> <p>Purpose of Disbursement Copier lease</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36744</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1251.86"/></p>
<p>B. Full Name (Last, First, Middle Initial) Republican Party of Fond du Lac</p> <p>Mailing Address 995 Birch Tree Lane</p> <p>City Fond du Lac State WI Zip Code 54935</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36727</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Republican Party of Kenosha</p> <p>Mailing Address PO Box 853</p> <p>City Kenosha State WI Zip Code 53141</p> <p>Purpose of Disbursement Reimbursement for phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36762</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="151.82"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1703.68"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Republican Party of Rock County	Transaction ID: SB30B.36760 Date of Disbursement 12 / 05 / 2008
	Mailing Address PO Box 164	Amount of Each Disbursement this Period 252.76
	City Beloit State WI Zip Code 53511	
	Purpose of Disbursement Utility reimbursement Candidate Name	Category/Type
	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) ▼
B.	Full Name (Last, First, Middle Initial) Karoline Rezin	Transaction ID: SB30B.36582 Date of Disbursement 11 / 25 / 2008
	Mailing Address 5329 Old Middleton Rd, Apt. 202	Amount of Each Disbursement this Period 1163.04
	City Madison State WI Zip Code 53705	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	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) ▼
C.	Full Name (Last, First, Middle Initial) Karoline Rezin	Transaction ID: SB30B.36640 Date of Disbursement 12 / 15 / 2008
	Mailing Address 5329 Old Middleton Rd, Apt. 202	Amount of Each Disbursement this Period 1163.04
	City Madison State WI Zip Code 53705	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2578.84

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

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

Full Name (Last, First, Middle Initial)
Richter's Sentry

Transaction ID: SB30B.36772
Date of Disbursement

Mailing Address 156 S Pine St

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

City Burlington State WI Zip Code 53105

Amount of Each Disbursement this Period

Purpose of Disbursement
11/25 Kuehn Reimbursement: Food

Category/ Type

38.93

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
Richter's Sentry

Transaction ID: SB30B.36784
Date of Disbursement

Mailing Address 156 S Pine St

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

City Burlington State WI Zip Code 53105

Amount of Each Disbursement this Period

Purpose of Disbursement
11/25 Kuehn Reimbursement: Food

Category/ Type

8.98

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
Angela Riesterer

Transaction ID: SB30B.36583
Date of Disbursement

Mailing Address 347 W Doty St

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

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Category/ Type

654.97

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

654.97

TOTAL This Period (last page this line number only)

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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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Angela Riesterer</p> <p>Mailing Address 347 W Doty St</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36641</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="654.95"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Angela Riesterer</p> <p>Mailing Address 347 W Doty St</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36665</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="172.87"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Angela Riesterer</p> <p>Mailing Address 347 W Doty St</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36687</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="654.96"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1482.78"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Roberts Frozen Custard	Transaction ID: SB30B.36801 Date of Disbursement 09 / 02 / 2008
	Mailing Address N112 W16040 Mequon Rd	Amount of Each Disbursement this Period 18.19
	City Germantown State WI Zip Code 53022	
	Purpose of Disbursement 12/15 Trovato reimbursement: food	
	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:	
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) James Sanders	Transaction ID: SB30B.36615 Date of Disbursement 11 / 26 / 2008
	Mailing Address 4510 Texas Trail	Amount of Each Disbursement this Period 414.24
	City Madison State WI Zip Code 53704	
	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:	

C.	Full Name (Last, First, Middle Initial) James Sanders	Transaction ID: SB30B.36649 Date of Disbursement 12 / 15 / 2008
	Mailing Address 4510 Texas Trail	Amount of Each Disbursement this Period 581.24
	City Madison State WI Zip Code 53704	
	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:	

SUBTOTAL of Disbursements This Page (optional)	995.48
TOTAL This Period (last page this line number only)	

**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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) James Sanders	Transaction ID: SB30B.36697
	Mailing Address 4510 Texas Trail	Date of Disbursement 12 / 31 / 2008
	City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period 354.33
	Purpose of Disbursement Payroll	Category/ Type
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Craig J Summerfield	Transaction ID: SB30B.36748
	Mailing Address 2044 Sweetfern Dr	Date of Disbursement 12 / 02 / 2008
	City Green Bay State WI Zip Code 54313	Amount of Each Disbursement this Period 996.05
	Purpose of Disbursement Payroll	Category/ Type
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Target - Lake Geneva	Transaction ID: SB30B.36771
	Mailing Address 660 N Edwards Blvd	Date of Disbursement 10 / 19 / 2008
	City Lake Geneva State WI Zip Code 53147	Amount of Each Disbursement this Period 20.93
	Purpose of Disbursement 11/25 Kuehn Reimbursement: Supplies	Category/ Type
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	1350.38
TOTAL This Period (last page this line number only)	▶	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Target - Racine	Transaction ID: SB30B.36787 Date of Disbursement
	Mailing Address 5300 Durand Ave	<input type="text" value="10"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Racine State WI Zip Code 53406	Amount of Each Disbursement this Period
	Purpose of Disbursement 11/25 Kuehn Reimbursement: Food	<input type="text" value="3.99"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) TDS Metrocom	Transaction ID: SB30B.36741 Date of Disbursement
	Mailing Address PO Box 1010	<input type="text" value="11"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Monroe State WI Zip Code 53566	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone bill	<input type="text" value="125.59"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) TDS Metrocom	Transaction ID: SB30B.36757 Date of Disbursement
	Mailing Address PO Box 1010	<input type="text" value="12"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Monroe State WI Zip Code 53566	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone bill	<input type="text" value="1469.35"/>
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1594.94"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Toppers Pizza Waukesha	Transaction ID: SB30B.36809 Date of Disbursement 08 / 31 / 2008
	Mailing Address 21461 E Moreland Blvd	Amount of Each Disbursement this Period 18.23
	City Waukesha State WI Zip Code 53186	
	Purpose of Disbursement 12/15 Trovato reimbursement: pizza	[MEMO ITEM]
	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) ▼	

B.	Full Name (Last, First, Middle Initial) Charles Triller	Transaction ID: SB30B.36616 Date of Disbursement 11 / 26 / 2008
	Mailing Address 609 East Gorham St #14	Amount of Each Disbursement this Period 295.82
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	[MEMO ITEM]
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Charles Triller	Transaction ID: SB30B.36650 Date of Disbursement 12 / 15 / 2008
	Mailing Address 609 East Gorham St #14	Amount of Each Disbursement this Period 257.53
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	[MEMO ITEM]
	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) ▼	

SUBTOTAL of Disbursements This Page (optional)	553.35
TOTAL This Period (last page this line number only)	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A. Full Name (Last, First, Middle Initial) Charles Triller</p> <p>Mailing Address 609 East Gorham St #14</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36698 Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 191.81</p>
<p>B. Full Name (Last, First, Middle Initial) Vincent Trovato</p> <p>Mailing Address 2820 N Burton Ct</p> <p>City Waukesha State WI Zip Code 53188</p> <p>Purpose of Disbursement Mileage/Expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36766 Date of Disbursement 12 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 1187.13</p>
<p>C. Full Name (Last, First, Middle Initial) Victory Strategies LLC</p> <p>Mailing Address PO Box 2152</p> <p>City Madison State WI Zip Code 53701</p> <p>Purpose of Disbursement Non-Allocable Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36754 Date of Disbursement 12 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 10000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11378.94

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

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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Jonathan Waclawski</p> <p>Mailing Address 1879 Shady Lane</p> <p>City Grafton State WI Zip Code 53024</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36734</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="974.97"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Walgreens Waukesha</p> <p>Mailing Address 221 E Sunset Dr</p> <p>City Waukesha State WI Zip Code 53186</p> <p>Purpose of Disbursement 12/15 Trovato reimbursement: stamps</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36800</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8.40"/></p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Walmart - Burlington</p> <p>Mailing Address 1901 Milwaukee Ave</p> <p>City Burlington State WI Zip Code 53105</p> <p>Purpose of Disbursement 11/25 Kuehn Reimbursement: supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36778</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="69.07"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A. Full Name (Last, First, Middle Initial) Walmart - Burlington</p> <p>Mailing Address 1901 Milwaukee Ave</p> <p>City Burlington State WI Zip Code 53105</p> <p>Purpose of Disbursement 11/25 Kuehn Reimbursement: Food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36776 Date of Disbursement: 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 61.36</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Walmart - Burlington</p> <p>Mailing Address 1901 Milwaukee Ave</p> <p>City Burlington State WI Zip Code 53105</p> <p>Purpose of Disbursement 11/25 Kuehn Reimbursement: food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36781 Date of Disbursement: 10 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 3.50</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Joshua Wilson</p> <p>Mailing Address 641 West Main Street</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36617 Date of Disbursement: 11 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 334.65</p>

SUBTOTAL of Disbursements This Page (optional) ▶

334.65

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

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.

Full Name (Last, First, Middle Initial)
Joshua Wilson

Mailing Address 641 West Main Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB30B.36651

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

571.69

B.

Full Name (Last, First, Middle Initial)
Joshua Wilson

Mailing Address 641 West Main Street

City Madison State WI Zip Code 53703

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB30B.36699

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

196.33

C.

Full Name (Last, First, Middle Initial)
Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement
Payroll tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB30B.36619

Date of Disbursement

11 / 26 / 2008

Amount of Each Disbursement this Period

1097.06

SUBTOTAL of Disbursements This Page (optional) ▶

1865.08

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

**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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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue</p> <p>Mailing Address PO Box 93208</p> <p>City Milwaukee State WI Zip Code 53293</p> <p>Purpose of Disbursement Payroll tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36739</p> <p>Date of Disbursement 11 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 68.41</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue</p> <p>Mailing Address PO Box 93208</p> <p>City Milwaukee State WI Zip Code 53293</p> <p>Purpose of Disbursement Payroll tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36653</p> <p>Date of Disbursement 12 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1235.99</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue</p> <p>Mailing Address PO Box 93208</p> <p>City Milwaukee State WI Zip Code 53293</p> <p>Purpose of Disbursement Payroll tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.36689</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 3032.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4336.93

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

152645.94

SCHEDULE C (FEC Form 3X)

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

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FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

Transaction ID: SC/10.6376

LOAN SOURCE Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan 110000.00	Cumulative Payment To Date 110000.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred MM DD YY YY 01 09 2002	Date Due 2/28/13	Interest Rate 6.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="0.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value=".00"/>

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

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin
Transaction ID: SC/10.10726

LOAN SOURCE Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 5920	
City Madison State WI ZIP Code 53705	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
34000.00	34000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2 D D 3 1 Y Y Y Y 2 0 0 3	2/28/13	6.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	0.00

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) AT&T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9100			Allocated Activity or Event Year-To-Date 167774.50		
City Aurora	State IL	Zip Code 60507	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Long distance bill			Transaction ID: H4.36586		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
409.46		1052.90		1462.36

B. Full Name (Last, First, Middle Initial) Badgerland Chemical & Supply			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 620303			Allocated Activity or Event Year-To-Date 167832.40		
City Middleton	State WI	Zip Code 53562	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Custodial supplies			Transaction ID: H4.36588		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.21		41.69		57.90

C. Full Name (Last, First, Middle Initial) Great Glacier of Wisconsin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 249			Allocated Activity or Event Year-To-Date 167889.65		
City Lake Delton	State WI	Zip Code 53940	Date <input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Bottled Water			Transaction ID: H4.36592		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.03		41.22		57.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
441.70		1135.81		1577.51

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
MG&E

Mailing Address
PO Box 1231

City State Zip Code
Madison WI 53701

Purpose of Disbursement:
Energy bill

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

168682.12

Date 11 / 25 / 2008

Transaction ID: H4.36594

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
221.89 + 570.58 = 792.47

B. Full Name (Last, First, Middle Initial)
Pro One Janitorial Inc

Mailing Address
1486 Kenwood Center

City State Zip Code
Menasha WI 54952

Purpose of Disbursement:
Janitorial Services

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

169182.12

Date 11 / 25 / 2008

Transaction ID: H4.36596

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
140.00 + 360.00 = 500.00

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

Mailing Address
PO Box 1010

City State Zip Code
Monroe WI 53566

Purpose of Disbursement:
Phone bill

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

170308.41

Date 11 / 25 / 2008

Transaction ID: H4.36597

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
315.36 + 810.93 = 1126.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
677.25 + 1741.51 = 2418.76

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

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Tygris Vendor Finance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dept #1608			Allocated Activity or Event Year-To-Date 170988.12		
City Denver	State CO	Zip Code 80291	Date MM / DD / YYYY 11 / 25 / 2008		
Purpose of Disbursement: Copier lease			Transaction ID: H4.36599		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
190.32		489.39		679.71

B. Full Name (Last, First, Middle Initial) APC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6470 East Johns Crossing Suite 100			Allocated Activity or Event Year-To-Date 172947.07		
City Duluth	State GA	Zip Code 30097	Date MM / DD / YYYY 11 / 25 / 2008		
Purpose of Disbursement: Conference call			Transaction ID: H4.36720		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
548.51		1410.44		1958.95

C. Full Name (Last, First, Middle Initial) Office Max			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2420 East Springs Dr			Allocated Activity or Event Year-To-Date 173868.59		
City Madison	State WI	Zip Code 53701	Date MM / DD / YYYY 11 / 25 / 2008		
Purpose of Disbursement: Office supplies			Transaction ID: H4.36723		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
258.03		663.49		921.52

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
996.86		2563.32		3560.18

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 25505			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">174416.89</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div>	
Lehigh Valley	PA	18002		
Purpose of Disbursement: Wireless internet			Date M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 8 Transaction ID: H4.36725	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
153.52		394.78		548.30

B. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 9027			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">175909.87</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div>	
Des Moines	IA	50368		
Purpose of Disbursement: Office supplies			Date M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 8 Transaction ID: H4.36756	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
418.03		1074.95		1492.98

C. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 9027			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">176891.56</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div>	
Des Moines	IA	50368		
Purpose of Disbursement: Office supplies			Date M M / D D / Y Y Y Y 1 2 / 2 5 / 2 0 0 8 Transaction ID: H4.36722	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
274.87		706.82		981.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
846.42		2176.55		3022.97

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) AT&T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9100			Allocated Activity or Event Year-To-Date 179121.87		
City Aurora	State IL	Zip Code 60507	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Long distance bill			Transaction ID: H4.36700		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
624.49		1605.82		2230.31

B. Full Name (Last, First, Middle Initial) Badgerland Chemical & Supply			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 620303			Allocated Activity or Event Year-To-Date 179253.67		
City Middleton	State WI	Zip Code 53562	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Custodial supplies			Transaction ID: H4.36701		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.90		94.90		131.80

C. Full Name (Last, First, Middle Initial) Charter Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 135 South LaSalle Street Dept 8123			Allocated Activity or Event Year-To-Date 179318.96		
City Chicago	State IL	Zip Code 60674	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Cable TV			Transaction ID: H4.36702		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.28		47.01		65.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
679.67		1747.73		2427.40

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

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Green Valley Disposal			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 473			Allocated Activity or Event Year-To-Date 179423.46	
City Waukegee	State WI	Zip Code 53597	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>	
Purpose of Disbursement: Waste disposal			Transaction ID: H4.36703	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.26		75.24		104.50

B. Full Name (Last, First, Middle Initial) MG&E			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1231			Allocated Activity or Event Year-To-Date 180120.50	
City Madison	State WI	Zip Code 53701	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>	
Purpose of Disbursement: Energy bill			Transaction ID: H4.36704	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
195.17		501.87		697.04

C. Full Name (Last, First, Middle Initial) Pro One Janitorial Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1486 Kenwood Center			Allocated Activity or Event Year-To-Date 180620.50	
City Menasha	State WI	Zip Code 54952	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>	
Purpose of Disbursement: Custodial service			Transaction ID: H4.36706	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.00		360.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
364.43		937.11		1301.54

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
TDS Metrocom

Mailing Address
PO Box 1010

City State Zip Code
Monroe WI 53566

Purpose of Disbursement:
Phone bill

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

182063.74

Date MM / DD / YYYY
12 / 31 / 2008

Transaction ID: H4.36707

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
404.11		1039.13		1443.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
404.11		1039.13		1443.24

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
4410.44	11341.16	15751.60

Image# 29932012814

Form/Schedule: **SB30B**

Transaction ID: **SB30B.36766**

In addition to the memo entries itemizing the expenses included in this payment, \$1040.04 was paid for mileage (2568mi. x .405 = \$1040.04).

Form/Schedule: **SC/10**

Transaction ID: **SC/10.6376**

On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments. FEC Tech Support has advised this procedure to show a draw on the line of credit
