

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2020 NOV -9 AM 9:16

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Republican Party of The 6th Congressional District of Wisconsin

ADDRESS (number and street) 11699 W 6th Ave

Check if different than previously reported. (ACC) OSHKOSH WI 54902

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00008755

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on MM / DD / YYYYYY in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYYYY in the State of

5. Covering Period MM / DD / YYYYYY through MM / DD / YYYYYY

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

Type or Print Name of Treasurer John R Wieland

Signature of Treasurer John R Wieland Date MM / DD / YYYYYY

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Republican Party of the 6th Congressional District of Wisconsin

Report Covering the Period: From:

To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		<input type="text" value="2133.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2292.70"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="1132.49"/>	<input type="text" value="6659.93"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3425.19"/>	<input type="text" value="8793.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1136.93"/>	<input type="text" value="6505.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2288.26"/>	<input type="text" value="2288.26"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	

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

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

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

UNCOMMUNICATED INFORMATION

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Republican Party of the 6th Congressional District of Wisconsin

Report Covering the Period: From: **MM** / **DD** / **YYYY** To: **MM** / **DD** / **YYYY**
07 / **01** / **2020** To: **09** / **30** / **2020**

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A).....

10,318.6

24,618.6

(ii) Unitemized.....
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

10,318.6

24,618.6

(b) Political Party Committees.....
(c) Other Political Committees (such as PACs).....
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

100.00

3,945.00

11,318.6

6,406.86

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

63

25,307

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

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

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

11,324.9

6,659.93

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

11,324.9

6,659.93

2025 RELEASE UNDER E.O. 14176

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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

477.13

4977.13

659.80

1136.93

1136.93

6505.27

6505.27

477.13

4977.13

659.80

1136.93

1136.93

6505.27

6505.27

NON-FEDERAL DISBURSEMENTS

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1,131,860	6,406,860
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1,131,860	6,406,860
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

COMMUNION BANK

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 7 OF 5
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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 the 6th Congressional District of Wisconsin

A. *Jeremy Thiesfeldt*
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
609 Sunset Lane

City *Fond du Lac* State *WI* Zip Code *54935*

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

Name of Employer (for Individual) Occupation (for Individual)
State Rep.

Receipt For:
 Primary General
 Other (specify) *State Rep.*

Aggregate Year-to-Date

Date of Receipt
07 / 15 / 2020

Amount of Each Receipt this Period
79.13

Memo Item

B. *Alan Ott*
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
270 Whispering Springs Drive

City *Fond du Lac* State *WI* Zip Code *54937*

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

Name of Employer (for Individual) Occupation (for Individual)
District Director

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt
07 / 15 / 2020

Amount of Each Receipt this Period
263.75

Memo Item

C. *Berh Seif*
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
231 Bischoff St.

City *Fond du Lac* State *WI* Zip Code *54935*

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt
07 / 15 / 2020

Amount of Each Receipt this Period
3165

Memo Item

SUBTOTAL of Receipts This Page (optional) *3165*

TOTAL This Period (last page this line number only) *3165*

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 2 OF 5

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

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NAME OF COMMITTEE (In Full)

Republican Party of the 6th Congressional District of Wisconsin

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

A. David Seifil

Mailing Address: 2311 Bischoff St.

City: Fond du Lac

State: WI

Zip Code: 54935

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual): Personal Asst.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

[Empty aggregate field]

Date of Receipt

07 / 15 / 2020

Amount of Each Receipt this Period

3165

Memo Item

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

B. Raffkecht, Harold

Mailing Address: N6734 Triple T Road

City: Mt Calvary

State: WI

Zip Code: 53057

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual): Sales

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

[Empty aggregate field]

Date of Receipt

07 / 15 / 2020

Amount of Each Receipt this Period

3165

Memo Item

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

C. Steffes Barb

Mailing Address: 321 E 9th Street

City: Fond du Lac

State: WI

Zip Code: 54935

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual): Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

[Empty aggregate field]

Date of Receipt

07 / 15 / 2020

Amount of Each Receipt this Period

3165

Memo Item

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

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

[Empty subtotal field]

[Empty total field]

2025 RELEASE UNDER E.O. 14176

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

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

FOR LINE NUMBER: PAGE 3 OF 5
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of the 6th Congressional District of Wisconsin

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Albert, Matthew
Mailing Address
4001 Towne Lakes Circle
City
Grand Chute State WI Zip Code 54913
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Occupation (for Individual)
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
07 / 15 / 2020
Amount of Each Receipt this Period
79.13
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Sreenbergen, Leon
Mailing Address
11519 Hawthorne Dr.
City
Waupun State WI Zip Code 53963
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Occupation (for Individual)
Retired.
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
07 / 15 / 2020
Amount of Each Receipt this Period
31.65
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Hare, Kellie
Mailing Address
N7390 N. Pioneer Rd
City
Fond du Lac State WI Zip Code 54937
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Occupation (for Individual)
Retired
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
07 / 15 / 2020
Amount of Each Receipt this Period
31.65
 Memo Item

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

NON-FEDERAL GOVERNMENT

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 4 OF 5
(check only one)

11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of the 6th Congressional District of Wisconsin

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Lorrigan, Lee

Mailing Address
766 Sterling Dr.

City **Fond du Lac** State **WI** Zip Code **54935**

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

Name of Employer (for Individual) Occupation (for Individual)
Director

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt
07 / 15 / 2020

Amount of Each Receipt this Period
31.65

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Franck, Barb

Mailing Address

City **North Fond du Lac** State **WI** Zip Code **54935**

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

Name of Employer (for Individual) Occupation (for Individual)
Doctor

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt
07 / 15 / 2020

Amount of Each Receipt this Period
31.65

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Wulff, Jessicay

Mailing Address
908 Eastman St.

City **Dshkosh** State **WI** Zip Code **54901**

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

Name of Employer (for Individual) Occupation (for Individual)
Student

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt
07 / 15 / 2020

Amount of Each Receipt this Period
31.65

Memo Item

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

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

2025 RELEASE UNDER E.O. 14176

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 5
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of the 6th Congressional District of Wisconsin

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

A. Hinz, Lynn

Mailing Address
137 Brockway Ave.

City Oshkosh State WI Zip Code 54902

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) Occupation (for Individual)
Retired

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

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2020

Amount of Each Receipt this Period
200.00
 Memo Item

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

B. Heinlein, Marilyn

Mailing Address
NH30 County Road P

City Rubicon State WI Zip Code 53078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) Occupation (for Individual)

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

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2020

Amount of Each Receipt this Period
75.00
 Memo Item

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

C. DeJong, Arthur

Mailing Address
1510 N 5th St.

City Sheboygan State WI Zip Code 53081

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) Occupation (for Individual)

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

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2020

Amount of Each Receipt this Period
50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)
 TOTAL This Period (last page this line number only) 1031.86

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

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

FOR LINE NUMBER: PAGE 1 OF 1

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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 the 6th Congressional District of Wisconsin

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

A. *Winnebago County Republican Party*

Mailing Address

PO Box 176

City *Oshkosh* State *WI* Zip Code *54903*

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

Name of Employer (for Individual) Occupation (for Individual)

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

Date of Receipt

09 / 30 / 2020

Amount of Each Receipt this Period

100.00

Memo Item

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

B.

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

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

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

C.

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

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

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

100.00

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

100.00

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

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NAME OF COMMITTEE (In Full)
Republican Party of the 6th Congressional District of Wisconsin

A. West Pointe Bank.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1750 Witzel Ave

City **Oshkosh** State **WI** Zip Code **54902**

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **▼**

Date of Receipt
09 / 30 / 2020

Amount of Each Receipt this Period
63

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **▼**

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **▼**

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **63**

TOTAL This Period (last page this line number only)..... **63**

**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 1 OF 1

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

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NAME OF COMMITTEE (In Full)

Republican Party of the 6th Congressional District of Wisconsin

Full Name (Last, First, Middle Initial)

A. *Fond du Lac Republican Party*

Mailing Address
Po Box 665

City *Fond du Lac* State *WI* Zip Code *54936-0665*

Purpose of Disbursement
Transfer funds from Fundraiser

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

08 / 20 / 2020

FEC Identification Number

C

Amount of Each Disbursement this Period

477.13

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

_____ / _____ / _____

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

_____ / _____ / _____

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

477.13

2025 RELEASE UNDER E.O. 14176

**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 1 OF 2

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

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NAME OF COMMITTEE (In Full)

Republican Party of the 6th Congressional District of Wisconsin

Full Name (Last, First, Middle Initial)

A. <i>Mail Chimp</i>		Date of Disbursement
Mailing Address <i>675 Ponce de Leon Ave NE #5000</i>		<input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y Y Y Y <i>07 / 24 / 2020</i>
City <i>Atlanta</i>	State <i>GA</i>	FEC Identification Number <i>C</i>
Zip Code <i>30303</i>	Purpose of Disbursement <i>Email Distribution</i>	Amount of Each Disbursement this Period <i>59.99</i>
Candidate Name	Category/Type	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. <i>Mail Chimp</i>		Date of Disbursement
Mailing Address <i>675 Ponce de Leon Ave NE #5000</i>		<input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y Y Y Y <i>08 / 24 / 2020</i>
City <i>Atlanta</i>	State <i>GA</i>	FEC Identification Number <i>C</i>
Zip Code <i>30303</i>	Purpose of Disbursement <i>Email Distribution</i>	Amount of Each Disbursement this Period <i>59.99</i>
Candidate Name	Category/Type	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. <i>Mail Chimp</i>		Date of Disbursement
Mailing Address <i>675 Ponce de Leon Ave NE #5000</i>		<input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y Y Y Y <i>09 / 24 / 2020</i>
City <i>Atlanta</i>	State <i>GA</i>	FEC Identification Number <i>C</i>
Zip Code <i>30303</i>	Purpose of Disbursement <i>Email Distribution</i>	Amount of Each Disbursement this Period <i>59.99</i>
Candidate Name	Category/Type	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).....▶

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 <u>2</u> OF <u>2</u>
	<input type="checkbox"/> 21b <input type="checkbox"/> 28a	<input type="checkbox"/> 22 <input type="checkbox"/> 28b	<input type="checkbox"/> 23 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 26 <input type="checkbox"/> 29	<input type="checkbox"/> 27 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
Republican Party of the 6th Congressional District of Wisconsin

A. Full Name (Last, First, Middle Initial) Darryl Carlson

Mailing Address PO Box 116

City Sheboygan W State WI Zip Code 53082

Purpose of Disbursement Reimb. Food Fundraiser

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement 08 20 2020

FEC Identification Number C

Amount of Each Disbursement this Period 383.67

Memo Item _____

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

Mailing Address 155 5th Street Floor 7

City San Francisco State CA Zip Code 94016

Purpose of Disbursement Bank Fees

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement 07 15 2020

FEC Identification Number C

Amount of Each Disbursement this Period 96.16

Memo Item _____

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

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement _____

FEC Identification Number C

Amount of Each Disbursement this Period _____

Memo Item _____

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

TOTAL This Period (last page this line number only).....▶ 659.80

COUNTINGDOWN.COM

JOHN R WIELAND, CPA
LLC
1010 W 20th AVE
OSHKOSH WI 54902

Federal Elections Commission
1050 First St. NE
Washington DC 20463

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Federal Election Commission
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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER *SPM* DATE PREPARED *11/10/20*
 (3/2015)

ENCLOSURE