

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Worzala For Congress

ADDRESS (number and street)

PO Box 2073

Check if different than previously reported. (ACC)

Madison

WI

53701

2. FEC IDENTIFICATION NUMBER ▼

C C00502617

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

WI

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2012

through

M M / D D / Y Y Y Y
06 / 30 / 2012

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 Ms Lisa Veldran

Signature of Treasurer Ms Lisa Veldran

[Electronically Filed]

Date

M M / D D / Y Y Y Y
06 / 30 / 2012

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Worzala For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	3360.79	116550.15
(b) Total Contribution Refunds (from Line 20(d))	83185.00	87603.11
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-79824.21	28947.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	100646.77	167931.65
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	100646.77	167931.65
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
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	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Worzala For Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	765.79	83386.53
(ii) Unitemized.....	2595.00	28845.51
(iii) TOTAL of contributions from individuals ▶	3360.79	112232.04
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4318.11
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3360.79	116550.15
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	100000.00
(b) All Other Loans.....	0.00	200000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	300000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	3360.79	416550.15

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100646.77	167931.65
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	128365.39	128365.39
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	128365.39	128365.39
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	83185.00	83435.00
(b) Political Party Committees.....	0.00	4168.11
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	83185.00	87603.11
21. OTHER DISBURSEMENTS	32500.00	32500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	344697.16	416400.15

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	341336.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3360.79
25. SUBTOTAL (add Line 23 and Line 24).....	344697.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	344697.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 72
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Worzala For Congress

A. Full Name (Last, First, Middle Initial)
Susan De Vos

Mailing Address 610 N Midvale Blvd

City Madison State WI Zip Code 53705-3200

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

Name of Employer N/A Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 14 / 2012

Transaction ID : C8135387

Amount of Each Receipt this Period
50.00

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

Mailing Address 357 Bianco Dr

City Elk Grove Village State IL Zip Code 60007-4401

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

Name of Employer LIFE FITNESS, A DIVISION OF BRUNSWICK Occupation FINANCIAL REPORTING MANAGER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2012

Transaction ID : C8287892

Amount of Each Receipt this Period
100.00

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

Mailing Address 489 S Main St

City Andover State MA Zip Code 01810-6256

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

Name of Employer Thayer Academy Occupation Controller

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2012

Transaction ID : C8287566

Amount of Each Receipt this Period
50.00

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 6 OF 72
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Worzala For Congress

A. Full Name (Last, First, Middle Initial)
Susan B. Patchen

Mailing Address 4817 Tocora Ln

City Madison State WI Zip Code 53711-1222

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2012

Transaction ID : C8287645

Amount of Each Receipt this Period
50.00

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

Mailing Address 3004 Monroe St

City Madison State WI Zip Code 53711-1810

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

Name of Employer state of wisconsin Occupation grant specialist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 29 / 2012

Transaction ID : C8285563

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
John R. Snell

Mailing Address 558 Echo Valley Rd

City Brooklyn State WI Zip Code 53521-9448

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

Name of Employer Self-Employed Occupation Registered Nurse

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : C8106229

Amount of Each Receipt this Period
250.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 72
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Worzala For Congress

A. Full Name (Last, First, Middle Initial)
Julie Gruber Worzala

Mailing Address 1907 Rowley Ave

City Madison State WI Zip Code 53726-4127

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

Name of Employer Self Occupation Genie

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **662.54**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : C8109288

Amount of Each Receipt this Period
 _____ **15.79**

* In-Kind: Office Supplies

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

_____ **15.79**

_____ **765.79**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. ACT Blue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 14 Arrow Street, Suite 11		Amount of Each Disbursement this Period 0.20 Transaction ID : D387496
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Adelstein Liston		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 222 W. Ontario St. Suite 600		Amount of Each Disbursement this Period 15000.00 Transaction ID : D388566
City Chicago	State IL	
Zip Code 60654	Purpose of Disbursement Campaign Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Adelstein Liston		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 222 W. Ontario St. Suite 600		Amount of Each Disbursement this Period 1100.61 Transaction ID : D388567
City Chicago	State IL	
Zip Code 60654	Purpose of Disbursement Campaign Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16100.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Associated Bank		M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 1720 Monroe Street		Amount of Each Disbursement this Period
City Madison	State WI	Zip Code 53711
Purpose of Disbursement Banking Services	Category/Type	
Candidate Name	Transaction ID : D390462	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Associated Bank		M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 1720 Monroe Street		Amount of Each Disbursement this Period
City Madison	State WI	Zip Code 53711
Purpose of Disbursement Bank fees	Category/Type	
Candidate Name	Transaction ID : D397556	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. AT&T		M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 23155 Northwestern Highway, Suite		Amount of Each Disbursement this Period
City Southfield	State MI	Zip Code 48075
Purpose of Disbursement Phone & Internet	Category/Type	
Candidate Name	Transaction ID : D390499	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	121.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 23155 Northwestern Highway, Suite		Amount of Each Disbursement this Period 31.65 Transaction ID : D388430
City Southfield State MI Zip Code 48075	Purpose of Disbursement Phone and internet	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 23155 Northwestern Highway, Suite		Amount of Each Disbursement this Period 31.65 Transaction ID : D383054
City Southfield State MI Zip Code 48075	Purpose of Disbursement Phone and internet	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 23155 Northwestern Highway, Suite		Amount of Each Disbursement this Period 73.11 Transaction ID : D388432
City Southfield State MI Zip Code 48075	Purpose of Disbursement Phone and internet	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	136.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Jake Breymaier		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 1655 N. Damen Avenue, #2		Amount of Each Disbursement this Period 2250.00 Transaction ID : D384903
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Campaign Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jake Breymaier		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 1655 N. Damen Avenue, #2		Amount of Each Disbursement this Period 3000.00 Transaction ID : D382085
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Campaign Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jake Breymaier		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 1655 N. Damen Avenue, #2		Amount of Each Disbursement this Period 2250.00 Transaction ID : D388214
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Campaign Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 72	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Jake Breymaier		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 1655 N. Damen Avenue, #2		Amount of Each Disbursement this Period 4500.00 Transaction ID : D388568
City Chicago State IL Zip Code 60647	Purpose of Disbursement Campaign Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jake Breymaier		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1655 N. Damen Avenue, #2		Amount of Each Disbursement this Period 100.00 Transaction ID : D389239
City Chicago State IL Zip Code 60647	Purpose of Disbursement Reimbursement for phone and internet setup	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jake Breymaier		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 1655 N. Damen Avenue, #2		Amount of Each Disbursement this Period 4500.00 Transaction ID : D390461
City Chicago State IL Zip Code 60647	Purpose of Disbursement Campaign Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Friends of Maya Cole		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 1818 Keyes Avenue		Amount of Each Disbursement this Period 33630.00 Transaction ID : D397566
City Madison State WI Zip Code 53711	Purpose of Disbursement Event reimbursement	
Candidate Name Maya Cole	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. GBA Strategies		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 1901 L Street NW, Suite 300		Amount of Each Disbursement this Period 31000.00 Transaction ID : D387300
City Washington State DC Zip Code 20036	Purpose of Disbursement Research	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grindstone Research		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 611 Commerce Street, 29th Floor		Amount of Each Disbursement this Period 2480.00 Transaction ID : D387299
City Nashville State TN Zip Code 37203	Purpose of Disbursement Campaign Research	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	33630.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Jeff Horvath		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 1918 West Lawn Avenue		Amount of Each Disbursement this Period 5725.75 Transaction ID : D381895
City Madison	State WI Zip Code 53711-2010	
Purpose of Disbursement Web site/media/consulting fee/NGP		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jeff Horvath		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1918 West Lawn Avenue		Amount of Each Disbursement this Period 5224.95 Transaction ID : D389193
City Madison	State WI Zip Code 53711-2010	
Purpose of Disbursement Web site/media/consulting fee/NGP		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jeff Horvath		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1918 West Lawn Avenue		Amount of Each Disbursement this Period 2577.65 Transaction ID : D389194
City Madison	State WI Zip Code 53711-2010	
Purpose of Disbursement Web site/media/consulting fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13528.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Merchant Services		M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 890 Mountain Avenue		Amount of Each Disbursement this Period
City	State	Zip Code
New Providence	NJ	07974
Purpose of Disbursement	Category/ Type	415.19
Credit card processing fee		
Candidate Name		Transaction ID : D381531
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Merchant Services		M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 890 Mountain Avenue		Amount of Each Disbursement this Period
City	State	Zip Code
New Providence	NJ	07974
Purpose of Disbursement	Category/ Type	183.71
Credit card processing fee		
Candidate Name		Transaction ID : D388436
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Merchant Services		M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 890 Mountain Avenue		Amount of Each Disbursement this Period
City	State	Zip Code
New Providence	NJ	07974
Purpose of Disbursement	Category/ Type	63.31
Credit Card Processing Fee		
Candidate Name		Transaction ID : D392540
Office Sought:	Disbursement For: 2012	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	662.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. MMPR		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2012
Mailing Address 1405 Riverside Street, Suite 110		Amount of Each Disbursement this Period 4702.18 Transaction ID : D395231
City Janesville State WI Zip Code 53548	Purpose of Disbursement Campaign Literature	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Betty Thompson		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 1020 Regent Street		Amount of Each Disbursement this Period 650.00 Transaction ID : D384688
City Madison State WI Zip Code 53715	Purpose of Disbursement Office Space	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. John C. Thompson		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 3784		Amount of Each Disbursement this Period 4000.00 Transaction ID : D381896
City Olathe State KS Zip Code 66063	Purpose of Disbursement Fundraising Consultant	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9352.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 72			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. John C. Thompson		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address P.O. Box 3784		Amount of Each Disbursement this Period 4000.00 Transaction ID : D388569
City Olathe	State KS	
Zip Code 66063	Purpose of Disbursement Fundraising Consultant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. John C. Thompson		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address P.O. Box 3784		Amount of Each Disbursement this Period 2000.00 Transaction ID : D388431
City Olathe	State KS	
Zip Code 66063	Purpose of Disbursement Fundraising Consultant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. John C. Thompson		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address P.O. Box 3784		Amount of Each Disbursement this Period 4500.00 Transaction ID : D390460
City Olathe	State KS	
Zip Code 66063	Purpose of Disbursement Fundraising Consultant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 72			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Julie Gruber Worzala			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012	
Mailing Address 1907 Rowley Ave			Amount of Each Disbursement this Period 15.79	
City Madison	State WI	Zip Code 53726-4127	Transaction ID : D384875	
Purpose of Disbursement Office Supplies		Category/ Type		
Candidate Name		* In-Kind Received		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		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:			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		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).....	15.79
TOTAL This Period (last page this line number only).....	100646.77

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 72	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. David Worzala		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 1907 Rowley Avenue		Amount of Each Disbursement this Period 20000.00 Transaction ID : D389274
City Madison	State WI Zip Code 53726-4127	
Purpose of Disbursement Loan Repayment	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. David Worzala		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 1907 Rowley Avenue		Amount of Each Disbursement this Period 108365.39 Transaction ID : D397557
City Madison	State WI Zip Code 53726-4127	
Purpose of Disbursement Loan Repayment	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. David Worzala		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 1907 Rowley Avenue		Amount of Each Disbursement this Period 61634.61 Transaction ID : D397558 [MEMO ITEM]
City Madison	State WI Zip Code 53726-4127	
Purpose of Disbursement Loan Forgiven	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	128365.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 72	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. David Worzala		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 1907 Rowley Avenue		Amount of Each Disbursement this Period 2000.00
City Madison	State WI Zip Code 53726-4127	
Purpose of Disbursement Loan Forgiven		Transaction ID : D390495
Candidate Name		
Office Sought:	Disbursement For: 2012	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. David Worzala		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 1907 Rowley Avenue		Amount of Each Disbursement this Period 8000.00
City Madison	State WI Zip Code 53726-4127	
Purpose of Disbursement Loan Forgiven		Transaction ID : D390497
Candidate Name		
Office Sought:	Disbursement For: 2012	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. David Worzala		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 1907 Rowley Avenue		Amount of Each Disbursement this Period 10000.00
City Madison	State WI Zip Code 53726-4127	
Purpose of Disbursement Loan Forgiven		Transaction ID : D390498
Candidate Name		
Office Sought:	Disbursement For: 2012	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	128365.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. James M. Angevine			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012		
Mailing Address 6205 Mineral Point Rd			Amount of Each Disbursement this Period 250.00		
City Madison	State WI	Zip Code 53705	Transaction ID : D389023		
Purpose of Disbursement Contribution Refund		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Rima D. Apple			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012		
Mailing Address 2013 Madison St			Amount of Each Disbursement this Period 250.00		
City Madison	State WI	Zip Code 53711-2129	Transaction ID : D389540		
Purpose of Disbursement Contribution Refund		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Greg Badger			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012		
Mailing Address 3206 Heatherdell Lane			Amount of Each Disbursement this Period 25.00		
City Madison	State WI	Zip Code 53713	Transaction ID : D390477		
Purpose of Disbursement Contribution Refund		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Dale Berg		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 503 S. Narberth		Amount of Each Disbursement this Period 1000.00
City Merion Station	State PA	
Zip Code 19066	Purpose of Disbursement Contribution Refund	Transaction ID : D388975
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Katherine Berg		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 5030 S. Narberth		Amount of Each Disbursement this Period 2400.00
City Merion Station	State PA	
Zip Code 19066	Purpose of Disbursement Contribution Refund	Transaction ID : D388976
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Steven R. Bergen		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 6310 Offshore Dr		Amount of Each Disbursement this Period 150.00
City Madison	State WI	
Zip Code 53705	Purpose of Disbursement Contribution Refund	Transaction ID : D389553
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Steve Brisse			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012	
Mailing Address 3125 Emerson Avenue South			Amount of Each Disbursement this Period 50.00	
City Minneapolis	State MN	Zip Code 55408	Transaction ID : D390469	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Paul E. Brown			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 9715 W Bexhill Dr			Amount of Each Disbursement this Period 500.00	
City Kensington	State MD	Zip Code 20895-3508	Transaction ID : D389138	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Vicki L. Brown			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 5504 West Fenrick Road			Amount of Each Disbursement this Period 200.00	
City Janesville	State WI	Zip Code 53548	Transaction ID : D389035	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Blaine Bull		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2909 Montebello Ct		Amount of Each Disbursement this Period 250.00 Transaction ID : D389130
City Austin State TX Zip Code 78746-6816	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stephen R. Bullerjahn		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 111 Allens Point Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : D389029
City Marion State MA Zip Code 02738-2301	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Amy Callies		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1414 Chandler Street		Amount of Each Disbursement this Period 300.00 Transaction ID : D388982
City Madison State WI Zip Code 53711	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Roy N. Callies		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1217 Nevada Road		Amount of Each Disbursement this Period 300.00 Transaction ID : D389016
City Madison	State WI	
Zip Code 53704-1757	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. George Campbell		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2020 N Dayton Street, Apt C		Amount of Each Disbursement this Period 250.00 Transaction ID : D389081
City Chicago	State IL	
Zip Code 60614-4360	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Nancy Candler		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1147 Willow Glen Way		Amount of Each Disbursement this Period 500.00 Transaction ID : D389040
City San Jose	State CA	
Zip Code 95125-3350	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Ellen Cantor		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 3923 Fairfax Square		Amount of Each Disbursement this Period 110.00 Transaction ID : D390482
City Fairfax	State VA	
Zip Code 22031	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Evan Cantor		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 910 Miami Way		Amount of Each Disbursement this Period 1500.00 Transaction ID : D388998
City Boulder	State CO	
Zip Code 80305-6454	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Robin Cantor		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 910 Miami Way		Amount of Each Disbursement this Period 2500.00 Transaction ID : D388997
City Boulder	State CO	
Zip Code 80303	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4110.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Matthew Aaron Casey		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 428 11th St SE		Amount of Each Disbursement this Period 500.00 Transaction ID : D389088
City Washington State DC Zip Code 20003-2150	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Byron Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 846 Woodrow Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : D388990
City Madison State WI Zip Code 53711-1959	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Cindy S. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 206 Windsor St		Amount of Each Disbursement this Period 500.00 Transaction ID : D388973
City Sun Prairie State WI Zip Code 53590	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" 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 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. David D. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1182 McMahon Drive		Amount of Each Disbursement this Period 1000.00 Transaction ID : D389021
City Sun Prairie	State WI	
Purpose of Disbursement Contribution Refund	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Theodore Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 206 Windsor St		Amount of Each Disbursement this Period 500.00 Transaction ID : D388974
City Sun Prairie	State WI	
Purpose of Disbursement Contribution Refund	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Dr. Laurits Ray Christensen		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 723 Wilder Dr		Amount of Each Disbursement this Period 200.00 Transaction ID : D389105
City Madison	State WI	
Purpose of Disbursement Contribution Refund	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Larry N. Cornellier Sr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 124 Buckridge Dr		Amount of Each Disbursement this Period 50.00 Transaction ID : D390466
City Beloit	State WI	
Zip Code 53511-6429		Category/ Type
Purpose of Disbursement Contribution Refund		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) B. Stephanie Costigan		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 8815 NW Lakecrest Avenue		Amount of Each Disbursement this Period 250.00 Transaction ID : D389060
City Vancouver	State WA	
Zip Code 98665-6514		Category/ Type
Purpose of Disbursement Contribution Refund		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) c. Donna Cowan		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address P.O. Box 74		Amount of Each Disbursement this Period 500.00 Transaction ID : D389065
City Jefferson	State NH	
Zip Code 03583		Category/ Type
Purpose of Disbursement Contribution Refund		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Susy Cranley		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1007 Edgehill Drive		Amount of Each Disbursement this Period 250.00 Transaction ID : D388988
City Madison	State WI Zip Code 53705-1410	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Elizabeth Crean		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 169 Dunning Street		Amount of Each Disbursement this Period 2500.00 Transaction ID : D389089
City Madison	State WI Zip Code 53704	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Steve Cripps		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 713 Notting Hill Way		Amount of Each Disbursement this Period 200.00 Transaction ID : D389120
City Madison	State WI Zip Code 53718-3264	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Mrs. Mrs. William H. Crook			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 227 N. Mitchell Avenue			Amount of Each Disbursement this Period 1000.00	
City San Marcos	State TX	Zip Code 78666	Transaction ID : D389116	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Charles G. Curtis			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 2115 Van Hise Ave			Amount of Each Disbursement this Period 250.00	
City Madison	State WI	Zip Code 53726-3945	Transaction ID : D389057	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Elizabeth P. Davey			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 3237 St. Ann Street			Amount of Each Disbursement this Period 200.00	
City New Orleans	State LA	Zip Code 70119	Transaction ID : D389073	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Elizabeth David		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 2603 Middleton Beach Rd		Amount of Each Disbursement this Period 100.00 Transaction ID : D390476
City Middleton	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Susan De Vos		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 610 N Midvale Blvd		Amount of Each Disbursement this Period 250.00 Transaction ID : D389542
City Madison	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Martha Durkin		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2207 E Waverly St		Amount of Each Disbursement this Period 250.00 Transaction ID : D389044
City Tucson	State AZ	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Maureen S. Durkin		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 8 N. Prospect Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : D388972
City Madison State WI Zip Code 53726	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lynne Watrous Eich		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 840 Farwell Drive		Amount of Each Disbursement this Period 200.00 Transaction ID : D389486
City Madison State WI Zip Code 53704-6034	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jane Englund		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 4813 County Trunk M		Amount of Each Disbursement this Period 350.00 Transaction ID : D389032
City Middleton State WI Zip Code 53562	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Lynn Entine		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 6747 Diversity Rd		Amount of Each Disbursement this Period 200.00 Transaction ID : D389551
City Middleton	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Melissa Ross Feldman		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 808 Broadway PHJ		Amount of Each Disbursement this Period 2500.00 Transaction ID : D389079
City New York	State NY	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Harris Fishman		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 124 Brook Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : D389037
City Sharon	State MA	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Carey E. Fitzmaurice		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 5200 Glenwood Rd		Amount of Each Disbursement this Period 3,000.00 Transaction ID : D389561
City Bethesda	State MD	
Zip Code 20814-1404	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Denise Flanagan		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1128 North Randolph Street		Amount of Each Disbursement this Period 2,500.00 Transaction ID : D389066
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Wesley K. Foell		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 35 Bagley Court		Amount of Each Disbursement this Period 600.00 Transaction ID : D388977
City Madison	State WI	
Zip Code 53705	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 72	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Scott Frank		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 7806 Betsy Lane		Amount of Each Disbursement this Period 2500.00 Transaction ID : D389026
City Verona	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Frank R Fuller		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1815 Madison Ave		Amount of Each Disbursement this Period 250.00 Transaction ID : D389136
City Austin	State TX	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Edward Gleason		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 714 Huron HI		Amount of Each Disbursement this Period 200.00 Transaction ID : D389025
City Madison	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	2950.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 72	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Robert S. Gray		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 186 E Lincoln St		Amount of Each Disbursement this Period 200.00 Transaction ID : D389109
City New Braunfels	State TX	
Zip Code 78130-4552	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Barbara Gruber		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 276 Hillside Ave		Amount of Each Disbursement this Period 2500.00 Transaction ID : D388978
City Pawtucket	State RI	
Zip Code 02860-6120	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Cynthia Gruber		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 709 Sudbury Rd		Amount of Each Disbursement this Period 2500.00 Transaction ID : D388979
City Concord	State MA	
Zip Code 01742	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Kimberly Gruber			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 16 Forest St			Amount of Each Disbursement this Period 2500.00	
City Lexington	State MA	Zip Code 02421	Transaction ID : D388971	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Michael Gruber			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 16 Forest St			Amount of Each Disbursement this Period 2500.00	
City Lexington	State MA	Zip Code 02421	Transaction ID : D388970	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Rubin Gruber			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 709 Sudbury Rd			Amount of Each Disbursement this Period 2500.00	
City Concord	State MA	Zip Code 01742	Transaction ID : D388980	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Ellen Hans		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 6412 22nd Road N		Amount of Each Disbursement this Period 500.00 Transaction ID : D389049
City Arlington	State VA	
Zip Code 22205-1914	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Loretta A. Himmelsbach		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 835 Pleasant Oak Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : D388994
City Oregon	State WI	
Zip Code 53575-3221	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Michael G. Hluchyj		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 21 Ledgeways		Amount of Each Disbursement this Period 500.00 Transaction ID : D389050
City Wellesley Hills	State MA	
Zip Code 02481	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 72	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Theresa M. Hluchyj		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 21 Ledgeways		Amount of Each Disbursement this Period 500.00 Transaction ID : D389052
City Wellesley Hills	State MA	
Zip Code 02481	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KRISTA HUBBARD		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 357 Bianco Dr		Amount of Each Disbursement this Period 300.00 Transaction ID : D389092
City Elk Grove Village	State IL	
Zip Code 60007-4401	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Linda Stack Hughes		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 531 N Pinckney Street, Unit F		Amount of Each Disbursement this Period 1000.00 Transaction ID : D388981
City Madison	State WI	
Zip Code 53703-1432	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Irene E. Huntoon		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 7211 Maple Avenue		Amount of Each Disbursement this Period 250.00 Transaction ID : D389135
City Takoma Park	State MD	
Zip Code 20912	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bobby R. Inman		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 3200 Riva Ridge Road		Amount of Each Disbursement this Period 250.00 Transaction ID : D389042
City Austin	State TX	
Zip Code 78746	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Nancy A. Jackson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 2430 SW 85th Ct		Amount of Each Disbursement this Period 150.00 Transaction ID : D389564
City Portland	State OR	
Zip Code 97225-3952	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Thomas Jeffries		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 5517 Greening Lane		Amount of Each Disbursement this Period 250.00 Transaction ID : D389070
City Madison	State WI	
Zip Code 53705-1219	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Jason Kadow		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 805 Silver Sage Trail		Amount of Each Disbursement this Period 2500.00 Transaction ID : D388983
City Middleton	State WI	
Zip Code 53562	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Todd Kaufman		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 1820 Bidwell Way		Amount of Each Disbursement this Period 100.00 Transaction ID : D390480
City Sacramento	State CA	
Zip Code 95818-4304	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2850.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Diane Kelly		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 10502 Daysailer Dr		Amount of Each Disbursement this Period 300.00 Transaction ID : D389083
City Fairfax Station	State VA	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Randall T. Kempner		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1503 Swann St NW, Apt A		Amount of Each Disbursement this Period 500.00 Transaction ID : D389129
City Washington	State DC	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Barnaby Kerr		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 5741 Dogwood Pl		Amount of Each Disbursement this Period 200.00 Transaction ID : D389534
City Madison	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Lisa Kerr		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 5741 Dogwood Pl		Amount of Each Disbursement this Period 200.00 Transaction ID : D389547
City Madison	State WI	
Zip Code 53705-2561	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Charles Kime		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1109 Brookwood Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : D389115
City Madison	State WI	
Zip Code 53711-3115	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Valerie Kime		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1109 Brookwood Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : D388991
City Madison	State WI	
Zip Code 53711-3115	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. John Keats Kirsch		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 7131 Maple Ave		Amount of Each Disbursement this Period 2500.00 Transaction ID : D389000
City Takoma Park	State MD	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Nicholas Kirsch		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 4809 Saint Elmo Avenue		Amount of Each Disbursement this Period 150.00 Transaction ID : D389568
City Bethesda	State MD	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Andrew Walter Kleine		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 9417 Worth Avenue		Amount of Each Disbursement this Period 350.00 Transaction ID : D389061
City Silver Spring	State MD	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Andrea Koss		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 230 Thomson Ln Apt 1		Amount of Each Disbursement this Period 200.00 Transaction ID : D389537
City Oregon	State WI	
Zip Code 53575-3277	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Stanley Ira Kutler		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 4112 Keewatin Trl		Amount of Each Disbursement this Period 50.00 Transaction ID : D390479
City Verona	State WI	
Zip Code 53593	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Marshall E. Kuykendall		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 3810 Medical Pkwy, Suite 149		Amount of Each Disbursement this Period 150.00 Transaction ID : D389562
City Austin	State TX	
Zip Code 78756-4023	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Rebecca Neudecker Leppala			Date of Disbursement MM / DD / YYYY 05 / 19 / 2012
Mailing Address 12300 Morocco Rd NE			Amount of Each Disbursement this Period 125.00 Transaction ID : D390464
City Albuquerque	State NM	Zip Code 87111-2846	
Purpose of Disbursement Contribution Refund		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Priscilla Loring			Date of Disbursement MM / DD / YYYY 05 / 14 / 2012
Mailing Address 489 S Main St			Amount of Each Disbursement this Period 250.00 Transaction ID : D389544
City Andover	State MA	Zip Code 01810-6256	
Purpose of Disbursement Contribution Refund		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Jeffrey Mayersohn			Date of Disbursement MM / DD / YYYY 05 / 11 / 2012
Mailing Address 29 Hundreds Rd			Amount of Each Disbursement this Period 1000.00 Transaction ID : D389054
City Wellesley	State MA	Zip Code 02481-1422	
Purpose of Disbursement Contribution Refund		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	1275.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Katie McGinley		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 416 Luverne Ave		Amount of Each Disbursement this Period 100.00 Transaction ID : D390472
City Minneapolis	State MN	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Nancy McMahon		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2550 Stonehaven Drive		Amount of Each Disbursement this Period 300.00 Transaction ID : D389009
City Sun Prairie	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Kris Moelter		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1506 Woodvale Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : D389002
City Madison	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Allan Nettleton		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 645 Sheldon Street		Amount of Each Disbursement this Period 500.00 Transaction ID : D389058
City Madison	State WI Zip Code 53711	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Daniel O'Callaghan		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2202 Commonwealth Avenue		Amount of Each Disbursement this Period 250.00 Transaction ID : D389036
City Madison	State WI Zip Code 53726-5302	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Susan B. Patchen		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 4817 Tocora Ln		Amount of Each Disbursement this Period 250.00 Transaction ID : D389548
City Madison	State WI Zip Code 53711-1222	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Jennifer T. Poulakidas		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1520 16th St NW, Apt 602		Amount of Each Disbursement this Period 500.00 Transaction ID : D389121
City Washington State DC Zip Code 20036-1447	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Clarence A. Ready		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 3002 Bluff Street		Amount of Each Disbursement this Period 400.00 Transaction ID : D389013
City Madison State WI Zip Code 53705-3422	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. David W. Reinecke		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2356 Sugar River Road		Amount of Each Disbursement this Period 300.00 Transaction ID : D389020
City Verona State WI Zip Code 53593-8740	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Daniel H. Rich		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2978 Woods Edge Way		Amount of Each Disbursement this Period 1000.00 Transaction ID : D389101
City Fitchburg State WI Zip Code 53711-5147	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jane Riley		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 3004 Monroe St		Amount of Each Disbursement this Period 500.00 Transaction ID : D389030
City Madison State WI Zip Code 53711-1810	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Beth Rossman		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2335 N Nottingham Street		Amount of Each Disbursement this Period 500.00 Transaction ID : D389048
City Arlington State VA Zip Code 22205	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" 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 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 72	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Paul R. Rusk		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1422 Wyldewood Drive		Amount of Each Disbursement this Period 250.00 Transaction ID : D389031
City Madison	State WI Zip Code 53704-3858	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Veronica S. Saeman		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 6205 Mineral Point Road, Apt. 110		Amount of Each Disbursement this Period 200.00 Transaction ID : D389539
City Madison	State WI Zip Code 53705	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Peggy Sampson		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 7228 N Beach Dr		Amount of Each Disbursement this Period 100.00 Transaction ID : D390470
City Fox Point	State WI Zip Code 53217-3659	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Sarina Schrager		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1430 Chandler Street		Amount of Each Disbursement this Period 500.00 Transaction ID : D389005
City Madison	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. John T. Schuhart		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 6831 Melrose Drive		Amount of Each Disbursement this Period 150.00 Transaction ID : D389563
City Mc Lean	State VA	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Eric L. Schulenburg		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 206 Virginia Terrace		Amount of Each Disbursement this Period 150.00 Transaction ID : D389558
City Madison	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Preston Schutt		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1506 Woodvale		Amount of Each Disbursement this Period 500.00 Transaction ID : D388986
City Madison	State WI	
Zip Code 53716	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Faith Sell		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 4051 7th Street NW		Amount of Each Disbursement this Period 2500.00 Transaction ID : D388984
City Rochester	State MN	
Zip Code 55901	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Jeremy J. Sell		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 4051 7th Street, NW		Amount of Each Disbursement this Period 1000.00 Transaction ID : D388996
City Rochester	State MN	
Zip Code 55901	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 72	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Roberto M. Sella		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1925 Manning St		Amount of Each Disbursement this Period 250.00 Transaction ID : D389128
City Philadelphia	State PA Zip Code 19103-5728	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Karen Shafer		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1408 E Calle De Caballos		Amount of Each Disbursement this Period 500.00 Transaction ID : D389125
City Tempe	State AZ Zip Code 85284-2406	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Polly Shaw		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1162 Stanyan Street		Amount of Each Disbursement this Period 250.00 Transaction ID : D389039
City San Francisco	State CA Zip Code 94117-3813	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. John Shenot		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 210 Peterson St		Amount of Each Disbursement this Period 800.00 Transaction ID : D390467
City Fort Collins	State CO	
Zip Code 80524-2920	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Max Sherman		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 3505 Greenway Street		Amount of Each Disbursement this Period 500.00 Transaction ID : D389033
City Austin	State TX	
Zip Code 78705-1817	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Robert E. Shumaker		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 222 Lakewood Blvd		Amount of Each Disbursement this Period 250.00 Transaction ID : D389103
City Madison	State WI	
Zip Code 53704-5916	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 72	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Joseph H. Silverberg		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 2803 Arbor Drive, Apt. 1		Amount of Each Disbursement this Period 50.00 Transaction ID : D390478
City Madison State WI Zip Code 53711	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jeffrey T. Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 7330 Old Sauk Road		Amount of Each Disbursement this Period 235.00 Transaction ID : D388995
City Madison State WI Zip Code 53717	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Michelle Crean Stellner		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 4506 Ferris Ave		Amount of Each Disbursement this Period 40.00 Transaction ID : D390481
City Madison State WI Zip Code 53716-1222	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Bradley Stevens		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1115 Zingg Dr		Amount of Each Disbursement this Period 1750.00 Transaction ID : D388964
City Verona	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Elizabeth Stevens		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 985 Walnut Street		Amount of Each Disbursement this Period 150.00 Transaction ID : D389554
City Verona	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Chandler Stolp		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 3008 Washington Square		Amount of Each Disbursement this Period 200.00 Transaction ID : D389062
City Austin	State TX	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Andrew Stoltman		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 5829 Highland Terrace		Amount of Each Disbursement this Period 550.00 Transaction ID : D388985
City Middleton	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Jeffrey J. Stoltman		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2 Little Bear Circle		Amount of Each Disbursement this Period 200.00 Transaction ID : D388987
City Middleton	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Sarah V. Stoltman		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 5916 Woodcreek Lane		Amount of Each Disbursement this Period 200.00 Transaction ID : D389532
City Middleton	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Gregory Sutter		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 2222 Pleasant View Rd, Unit 8		Amount of Each Disbursement this Period 150.00 Transaction ID : D389570
City Middleton	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Steve Swigart		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 1529 East Hartford Avenue		Amount of Each Disbursement this Period 125.00 Transaction ID : D390484
City Milwaukee	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Arthur Taggart		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 7309 Sawmill Road		Amount of Each Disbursement this Period 500.00 Transaction ID : D388992
City Madison	State WI	
Purpose of Disbursement Contribution Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. David Tornquist		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 3805 26th Street N		Amount of Each Disbursement this Period 250.00 Transaction ID : D389028
City Arlington	State VA	
Zip Code 22207-5241	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Louise Trubek		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 41 Eastern Parkway, Apt. 12B		Amount of Each Disbursement this Period 500.00 Transaction ID : D389027
City Brooklyn	State NY	
Zip Code 11238-5907	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Dora Ullian		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 76 Hyde Ave		Amount of Each Disbursement this Period 500.00 Transaction ID : D389041
City Newton	State MA	
Zip Code 02458-2332	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Richard T. Weig-Pickering			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012	
Mailing Address 6656 Shenandoah River Ct NE			Amount of Each Disbursement this Period 100.00	
City Rio Rancho	State NM	Zip Code 87144-6401	Transaction ID : D390465	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Justin Wharton			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012	
Mailing Address 12 Tower Hill Circle			Amount of Each Disbursement this Period 100.00	
City Brewster	State MA	Zip Code 02631	Transaction ID : D390473	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. John D. Wiley			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012	
Mailing Address 137 East Wilson Street, Apt P23			Amount of Each Disbursement this Period 500.00	
City Madison	State WI	Zip Code 53703	Transaction ID : D389096	
Purpose of Disbursement Contribution Refund		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Robert H. Wilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 5113 Valburn Court		Amount of Each Disbursement this Period 150.00 Transaction ID : D389559
City Austin State TX Zip Code 78731-1072	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Edward W. Wing		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 6639 Chestnut Cir		Amount of Each Disbursement this Period 200.00 Transaction ID : D389546
City Windsor State WI Zip Code 53598-9747	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Pat Wong		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 13500 Lone Rider Trail		Amount of Each Disbursement this Period 250.00 Transaction ID : D389043
City Austin State TX Zip Code 78738	Purpose of Disbursement Contribution Refund	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 72			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Elaine M. Worzala		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 108 Dogwood Terrace Lane		Amount of Each Disbursement this Period 2500.00 Transaction ID : D388999
City Clemson	State SC	
Zip Code 29631-2061	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Marcella Worzala		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 835 Pleasant Oak Drive		Amount of Each Disbursement this Period 2500.00 Transaction ID : D388993
City Oregon	State WI	
Zip Code 53575-3221	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Mary E. Worzala		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2402 Sommers Avenue		Amount of Each Disbursement this Period 2500.00 Transaction ID : D389008
City Madison	State WI	
Zip Code 53704-5613	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 72	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Timothy J. Yanacheck		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 5734 County Road D		Amount of Each Disbursement this Period 175.00
City Oregon	State WI Zip Code 53575	
Purpose of Disbursement Contribution Refund		Transaction ID : D392283
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Stacy K. Yates		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 202 Violet Ln		Amount of Each Disbursement this Period 500.00
City Lake Jackson	State TX Zip Code 77566-6039	
Purpose of Disbursement Contribution Refund		Transaction ID : D389113
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

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

SUBTOTAL of Disbursements This Page (optional).....	675.00
TOTAL This Period (last page this line number only).....	83185.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 72	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Democratic Party of Wisconsin		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 110 King Street, Suite 203		Amount of Each Disbursement this Period 25000.00 Transaction ID : D389604
City Madison	State WI	
Zip Code 53703	Purpose of Disbursement State Party Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kind For Congress		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address P.O. Box 184		Amount of Each Disbursement this Period 2500.00 Transaction ID : D389196
City La Crosse	State WI	
Zip Code 54602	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tammy Baldwin for Senate		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address P.O. Box 510622		Amount of Each Disbursement this Period 4000.00 Transaction ID : D389195
City Milwaukee	State WI	
Zip Code 53203	Purpose of Disbursement Campaign Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	31500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 72	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Worzala For Congress

Full Name (Last, First, Middle Initial) A. Torres for Congress		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2505 Lazy Lake Dr.		Amount of Each Disbursement this Period 1000.00
City Harlingen State TX Zip Code 78550	Purpose of Disbursement Campaign Contribution	
Candidate Name	Category/Type	Transaction ID : D389240
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	32500.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Worzala For Congress** Transaction ID : L734

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012
David Worzala PERS FUNDS Primary
 Mailing Address 1907 Rowley Avenue General
 Other (specify) ▼

City State ZIP Code
 Madison WI 53726-4127

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	2000.00	0.00

TERMS Date Incurred Date Due Interest Rate Secured:
 09 / 19 / 2011 / none % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. 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)..... ▶

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 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Worzala For Congress

Transaction ID : L735

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Worzala PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1907 Rowley Avenue

City State ZIP Code
Madison WI 53726-4127

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	20000.00	0.00

TERMS

Date Incurred: M 09 / D 20 / Y 2011
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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).....	[]

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 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Worzala For Congress

Transaction ID : L736

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Worzala PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1907 Rowley Avenue

City State ZIP Code
Madison WI 53726-4127

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
8000.00 8000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. 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).....

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 3)
LOANS

NAME OF COMMITTEE (In Full) **Worzala For Congress** Transaction ID : L753

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Worzala

Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
1907 Rowley Avenue

City State ZIP Code
Madison WI 53726-4127

Original Amount of Loan 170000.00	Cumulative Payment To Date 170000.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred: M 12 / D 27 / Y 2011
Date Due: M / D / Y
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. 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)..... ▶ []

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 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Worzala For Congress

Transaction ID : L801

LOAN SOURCE Full Name (Last, First, Middle Initial)
David Worzala

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1907 Rowley Avenue

City State ZIP Code
Madison WI 53726-4127

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100000.00 100000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. 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.