

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Republican Party of Wisconsin

ADDRESS (number and street) 148 E. Johnson Street
 Check if different than previously reported. (ACC)
Madison WI 53703

2. **FEC IDENTIFICATION NUMBER** C00074450
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 01 2009 through 11 30 2009

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 Cathy Stepp

Signature of Treasurer Electronically Filed by Cathy Stepp Date 12 17 2009

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 **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		286935.52
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	382905.06									
(c) Total Receipts (from Line 19)	45090.69	1169455.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	427995.75	1456391.44								
7. Total Disbursements (from Line 31)	87829.72	1116225.41								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	340166.03	340166.03								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Republican Party of Wisconsin

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	9425.00	252297.63
(ii) Unitemized	35665.69	732604.97
(iii) TOTAL (add Lines 11(a)(i) and (ii)	45090.69	984902.60
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	28191.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	45090.69	1013093.60
12. Transfers From Affiliated/Other Party Committees	0.00	150703.90
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	5658.42
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	45090.69	1169455.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	45090.69	1169455.92

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1426.44	19547.97
(ii) Non-Federal Share.....	8083.20	110772.28
(b) Other Federal Operating Expenditures.....	28863.36	383047.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	38373.00	513367.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	1764.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	5000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	120.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	120.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	49456.72	595973.76
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	49456.72	595973.76
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	87829.72	1116225.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79746.52	1005453.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	45090.69	1013093.60
34. Total Contribution Refunds (from Line 28(d))	0.00	120.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45090.69	1012973.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30289.80	402595.37
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	5658.42
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30289.80	396936.95

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 49
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Dr. Vicki Amundson

Mailing Address 842 N. 8th St

City State Zip Code
Black River Falls WI 54615-9107

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

Name of Employer Occupation
Wausau Ins. Co,s Cash Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2009

Transaction ID: SA11AI.78030

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Robert Baker

Mailing Address 832 N 6th Street Unit 415

City State Zip Code
Sheboygan WI 53081-4198

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

Name of Employer Occupation
N/A Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2009

Transaction ID: SA11AI.79556

Amount of Each Receipt this Period
100.00

Best efforts compliance

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Kazuko Bressler

Mailing Address 3117 Bay View Dr

City State Zip Code
Green Bay WI 54311-5909

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

Name of Employer Occupation
Information Requested Unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2009

Transaction ID: SA11AI.78435

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 49
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial) Carol Cullen		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	3	/	2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	3	/	2	0	9														
Mailing Address 220 Jefferson Ave		Transaction ID: SA11AI.79413																				
City Janesville	State WI	Zip Code 53545-4131																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>5000.00</td></tr> </table>	5000.00																			
5000.00																						
Name of Employer Information Requested	Occupation																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>5000.00</td></tr> </table>	5000.00																				
5000.00																						

B.

Full Name (Last, First, Middle Initial) Veronica Cummings		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	0	/	2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	0	/	2	0	9														
Mailing Address S42W34721 Big Oak Dr		Transaction ID: SA11AI.79337																				
City Dousman	State WI	Zip Code 53118-9717																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																			
250.00																						
Name of Employer Information Requested	Occupation																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																				
250.00																						

C.

Full Name (Last, First, Middle Initial) Richard Feller		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	9														
Mailing Address 2618 22nd Ave		Transaction ID: SA11AI.78002																				
City Monroe	State WI	Zip Code 53566																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>200.00</td></tr> </table>	200.00																			
200.00																						
Name of Employer Monroe Truck Equipment	Occupation CEO																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>700.00</td></tr> </table>	700.00																				
700.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%; text-align: center;"> <tr><td>5450.00</td></tr> </table>	5450.00
5450.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%; height: 20px;"></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 49
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial) Thomas Gould		Date of Receipt MM / DD / YYYY 10 / 26 / 2009
Mailing Address 1906 E Shorewood Blvd		Transaction ID: SA11AI.79558
City Milwaukee	State WI	Zip Code 53211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self	Occupation Futures Trader	Best efforts compliance
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial) Jeffrey Hazekamp		Date of Receipt MM / DD / YYYY 11 / 23 / 2009
Mailing Address 452 S. Garfield Ave.		Transaction ID: SA11AI.79422
City Janesville	State WI	Zip Code 53545
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Angus-Young Associates	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) Ho-Chunk Nation		Date of Receipt MM / DD / YYYY 11 / 05 / 2009
Mailing Address PO Box 640		Transaction ID: SA11AI.78359
City Black River Falls	State WI	Zip Code 54615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

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

Mailing Address 14440 Woodlawn Cir

City Elm Grove State WI Zip Code 53122-1649

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

Name of Employer Information Requested Occupation Information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 02 / 2009

Transaction ID: SA11AI.78069

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Mr. O. Johnson

Mailing Address 12617 N. Saint Anne Ln

City Mequon State WI Zip Code 53092-2232

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

Name of Employer N/a Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 30 / 2009

Transaction ID: SA11AI.79495

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Peter Koh

Mailing Address 6209 Lakeshore Dr

City Wausau State WI Zip Code 54401

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

Name of Employer Central WI Anes. Occupation Anesthesiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt 11 / 05 / 2009

Transaction ID: SA11AI.78361

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Mrs. Marion Kuether		Date of Receipt MM / DD / YYYY 11 / 12 / 2009		
	Mailing Address 932 1st St		Transaction ID: SA11AI.78888		
	City Kiel	State WI	Zip Code 53042-1208	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/a		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Frank Ladky		Date of Receipt MM / DD / YYYY 11 / 20 / 2009		
	Mailing Address 1711 East Fox Lane		Transaction ID: SA11AI.79295		
	City Milwaukee	State WI	Zip Code 53217	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Ladky & Assoc.		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

C.	Full Name (Last, First, Middle Initial) James Peterson		Date of Receipt MM / DD / YYYY 11 / 05 / 2009		
	Mailing Address N64 W14495 Poplar Dr		Transaction ID: SA11AI.78347		
	City Menomonee Falls	State WI	Zip Code 53051-5176	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Information Requested		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 49
(check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Mr. Robert L. Roesler

Mailing Address 4035 S. 84th St

City State Zip Code
Greenfield WI 53228-2335

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

Name of Employer Occupation
Homes for Independent Living Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2009

Transaction ID: SA11AI.78322

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Mason Ross

Mailing Address 2020 E. Glendale Ave

City State Zip Code
Milwaukee WI 53211-1239

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

Name of Employer Occupation
Information Requested Unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2009

Transaction ID: SA11AI.78217

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Dr. David Stecker

Mailing Address 1213 Grove St

City State Zip Code
Beaver Dam WI 53916-1029

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

Name of Employer Occupation
Self Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2009

Transaction ID: SA11AI.79106

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Orville Strachota

Mailing Address 111 Deer Ridge Rd

City State Zip Code
West Bend WI 53095

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2009

Transaction ID: SA11AI.78482

Amount of Each Receipt this Period
100.00

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

Mailing Address 9608 N Juniper Circle

City State Zip Code
Mequon WI 53092

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

Name of Employer Briggs & Stratton Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2009

Transaction ID: SA11AI.78107

Amount of Each Receipt this Period
500.00

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

Mailing Address 5437 County Road M

City State Zip Code
Fitchburg WI 53575-2020

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2009

Transaction ID: SA11AI.78874

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 49
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Mrs. Rebecca Young

Mailing Address S50w30017 Madrid Ln

City State Zip Code
Mukwonago WI 53149-8726

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

Name of Employer Occupation
Cash Works LLC Executive Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2009

Transaction ID: SA11AI.79557

Amount of Each Receipt this Period
100.00

Best efforts compliance

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mr. Raymond Zagar

Mailing Address PO Box 796

City State Zip Code
Elm Grove WI 53122-0796

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

Name of Employer Occupation
Information Requested Unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
11 / 12 / 2009

Transaction ID: SA11AI.78846

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 50.00

TOTAL This Period (last page this line number only) ► 9425.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A. Full Name (Last, First, Middle Initial) APC</p> <p>Mailing Address 6470 East Johns Crossing Suite 100</p> <p>City Duluth State GA Zip Code 30097</p> <p>Purpose of Disbursement Conference calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79610 Date of Disbursement 11 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 153.41</p>
<p>B. Full Name (Last, First, Middle Initial) Aspect Consulting LLC</p> <p>Mailing Address 414 N Livingston St #2</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Compliance consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79574 Date of Disbursement 11 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 2250.00</p>
<p>C. Full Name (Last, First, Middle Initial) Aspect Consulting LLC</p> <p>Mailing Address 414 N Livingston St #2</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Compliance consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79626 Date of Disbursement 11 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2250.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4653.41

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 15 / 49

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Domain Hosting Services	Transaction ID: SB21B.79681 Date of Disbursement
	Mailing Address 900 W Grove Pkwy	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Tempe State AZ Zip Code 85283	Amount of Each Disbursement this Period
	Purpose of Disbursement 11/25 CC Pmt: domain hosting	<input type="text" value="79.99"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) eDonation.com	Transaction ID: SB21B.79570 Date of Disbursement
	Mailing Address 118 North Saint Asaph St.	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card processing fee	<input type="text" value="8.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Facebook Advertising	Transaction ID: SB21B.79678 Date of Disbursement
	Mailing Address 156 University Ave	<input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Palo Alto State CA Zip Code 94301	Amount of Each Disbursement this Period
	Purpose of Disbursement 11/25 CC Pmt: Facebook ads	<input type="text" value="250.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8.80"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) GoDaddy.com Mailing Address 14455 N. Hayden Rd. #219 City Scottsdale State AZ Zip Code 85260 Purpose of Disbursement 11/25 CC Pmt: domain Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.79679 Date of Disbursement 10 / 27 / 2009 Amount of Each Disbursement this Period 4.99 [MEMO ITEM]	
B.	Full Name (Last, First, Middle Initial) Google Mailing Address 1600 Amphitheatre Pkwy City Mountain View State CA Zip Code 94043 Purpose of Disbursement 11/25 CC Pmt: Google ads Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.79677 Date of Disbursement 10 / 20 / 2009 Amount of Each Disbursement this Period 181.00 [MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) Greeting Cards Direct Mailing Address 400 N Frontage Rd City Landing State NJ Zip Code 07850 Purpose of Disbursement 11/25 CC Pmt: Cards Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.79684 Date of Disbursement 11 / 02 / 2009 Amount of Each Disbursement this Period 586.00 [MEMO ITEM]	

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Heinzen Printing Inc.	Transaction ID: SB21B.79616 Date of Disbursement MM / DD / YYYY 11 / 16 / 2009
	Mailing Address P.O. Box 267	Amount of Each Disbursement this Period 1065.55
	City Marshfield State WI Zip Code 54449	
	Purpose of Disbursement Printing - not FEA	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hotel Metro	Transaction ID: SB21B.79673 Date of Disbursement MM / DD / YYYY 10 / 02 / 2009
	Mailing Address 411 E Mason St	Amount of Each Disbursement this Period 49.28
	City Milwaukee State WI Zip Code 53202	
	Purpose of Disbursement 11/13 Priebus reimb: Meeting expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Hotel Metro	Transaction ID: SB21B.79675 Date of Disbursement MM / DD / YYYY 11 / 06 / 2009
	Mailing Address 411 E Mason St	Amount of Each Disbursement this Period 37.76
	City Milwaukee State WI Zip Code 53202	
	Purpose of Disbursement 11/13 Priebus reimb: Meeting expense	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	1065.55
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Kenosha News	Transaction ID: SB21B.79682
	Mailing Address 5800 7th Ave	Date of Disbursement 10 / 28 / 2009
	City Kenosha State WI Zip Code 53140	Amount of Each Disbursement this Period 2160.00
	Purpose of Disbursement 11/25 CC Pmt: Ad - Public Communication	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) M&I Bank Credit Card Processing Center	Transaction ID: SB21B.79631
	Mailing Address PO Box 3052	Date of Disbursement 11 / 25 / 2009
	City Milwaukee State WI Zip Code 53201	Amount of Each Disbursement this Period 3341.93
	Purpose of Disbursement CC Payment	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin	Transaction ID: SB21B.79609
	Mailing Address P.O. Box 5920	Date of Disbursement 11 / 13 / 2009
	City Madison State WI Zip Code 53705	Amount of Each Disbursement this Period 320.16
	Purpose of Disbursement Bank fee	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3662.09
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 49

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) M&I Merchant Services	Transaction ID: SB21B.79573 Date of Disbursement 11 / 10 / 2009
	Mailing Address P.O. Box 5920	Amount of Each Disbursement this Period 361.96
	City Madison State WI Zip Code 53705	
	Purpose of Disbursement credit card processing fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) OnMessage Inc.	Transaction ID: SB21B.79663 Date of Disbursement 11 / 16 / 2009
	Mailing Address 2130 Priest Bridge Dr. #11	Amount of Each Disbursement this Period 3000.00
	City Crofton State MD Zip Code 21114	
	Purpose of Disbursement Polling	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Paypal, Inc.	Transaction ID: SB21B.79676 Date of Disbursement 10 / 13 / 2009
	Mailing Address #774100, 4100 Solutions Center	Amount of Each Disbursement this Period 19.95
	City Chicago State IL Zip Code 60677-4001	
	Purpose of Disbursement 11/25 CC Pmt: cc processing fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	3361.96
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Reince Priebus</p> <p>Mailing Address 2340 2nd Street</p> <p>City Kenosha State WI Zip Code 54140</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79578</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="108.99"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Purchase Power</p> <p>Mailing Address Po Box 856042</p> <p>City Louisville State KY Zip Code 40285</p> <p>Purpose of Disbursement Postage for meter</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79563</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1731.13"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Thai Palace</p> <p>Mailing Address 838 N Old World 3rd St</p> <p>City Milwaukee State WI Zip Code 53203</p> <p>Purpose of Disbursement 11/13 Priebus reimb: Meeting expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79671</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.95"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1840.12"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

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

Transaction ID: SB21B.79630
Date of Disbursement

Mailing Address 6652 Offshore Drive

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

City Madison State WI Zip Code 53705

Amount of Each Disbursement this Period

Purpose of Disbursement
Political consulting: opposition research

1100.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Unisource Direct

Transaction ID: SB21B.79569
Date of Disbursement

Mailing Address 925 Harrington Drive

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

City Madison State WI Zip Code 53718

Amount of Each Disbursement this Period

Purpose of Disbursement
Postage for mailing

2700.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Unisource Direct

Transaction ID: SB21B.79621
Date of Disbursement

Mailing Address 925 Harrington Drive

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

City Madison State WI Zip Code 53718

Amount of Each Disbursement this Period

Purpose of Disbursement
Finance mailing

2098.27

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5898.27

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Unisource Direct</p> <p>Mailing Address 925 Harrington Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Finance mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79622</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Unisource Direct</p> <p>Mailing Address 925 Harrington Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Finance mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79623</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1578.53"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Unisource Direct</p> <p>Mailing Address 925 Harrington Drive</p> <p>City Madison State WI Zip Code 53718</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.79625</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5400.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue	Transaction ID: SB21B.79567 Date of Disbursement																			
	Mailing Address PO Box 93208	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	4	/	2	0	0	9												
	City Milwaukee State WI Zip Code 53293	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Records request	<table border="1"><tr><td>40.00</td></tr></table>	40.00																		
40.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue	Transaction ID: SB21B.79568 Date of Disbursement																			
	Mailing Address PO Box 93208	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	4	/	2	0	0	9												
	City Milwaukee State WI Zip Code 53293	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Records request	<table border="1"><tr><td>40.00</td></tr></table>	40.00																		
40.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue	Transaction ID: SB21B.79572 Date of Disbursement																			
	Mailing Address PO Box 93208	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	0	9												
	City Milwaukee State WI Zip Code 53293	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Records request	<table border="1"><tr><td>40.00</td></tr></table>	40.00																		
40.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>120.00</td></tr></table>	120.00
120.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Wisc. Dept of Revenue - Sls Tax	Transaction ID: SB21B.79633
	Mailing Address PO Box 93389	Date of Disbursement MM / DD / YYYY 11 / 30 / 2009
	City Milwaukee State WI Zip Code 53293	Amount of Each Disbursement this Period 55.55
	Purpose of Disbursement Sales/Use tax	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wisconsin State Fair Park	Transaction ID: SB21B.79680
	Mailing Address P.O. Box 14990	Date of Disbursement MM / DD / YYYY 10 / 27 / 2009
	City West Allis State WI Zip Code 53214	Amount of Each Disbursement this Period 60.00
	Purpose of Disbursement 11/25 CC Pmt: Meeting expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	55.55
TOTAL This Period (last page this line number only)	28644.28

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.79608 Date of Disbursement
	Mailing Address PO Box 6164	<input type="text" value="11"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee simple IRA	<input type="text" value="623.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Funds Service Company	Transaction ID: SB30B.79634 Date of Disbursement
	Mailing Address PO Box 6164	<input type="text" value="11"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Indianapolis State IN Zip Code 46206	Amount of Each Disbursement this Period
	Purpose of Disbursement Employee simple IRA	<input type="text" value="558.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kevin Binversie	Transaction ID: SB30B.79586 Date of Disbursement
	Mailing Address 919 N 5th Street	<input type="text" value="11"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Sheboygan State WI Zip Code 53081	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="718.49"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1900.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Kevin Binversie

Transaction ID: SB30B.79636
Date of Disbursement

Mailing Address 919 N 5th Street

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	9

City Sheboygan State WI Zip Code 53081

Amount of Each Disbursement this Period

441.99

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Dudley Bowlby

Transaction ID: SB30B.79596
Date of Disbursement

Mailing Address 250 Femrite Drive

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

City Madison State WI Zip Code 53716

Amount of Each Disbursement this Period

675.34

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Dudley Bowlby

Transaction ID: SB30B.79646
Date of Disbursement

Mailing Address 250 Femrite Drive

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	9

City Madison State WI Zip Code 53716

Amount of Each Disbursement this Period

569.61

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1686.94

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Matthew Brabender	Transaction ID: SB30B.79597 Date of Disbursement
	Mailing Address 3914 Rieder Road #1	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="511.16"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Matthew Brabender	Transaction ID: SB30B.79647 Date of Disbursement
	Mailing Address 3914 Rieder Road #1	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Madison State WI Zip Code 53704	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="503.66"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Molly Christianson	Transaction ID: SB30B.79593 Date of Disbursement
	Mailing Address 5133 Woodfield Dr.	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City Carmel State IN Zip Code 46033	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="177.14"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1191.96"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Molly Christianson	Transaction ID: SB30B.79643
	Mailing Address 5133 Woodfield Dr.	Date of Disbursement MM / DD / YYYY 11 / 30 / 2009
	City Carmel State IN Zip Code 46033	Amount of Each Disbursement this Period 154.10
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Andrew Davis	Transaction ID: SB30B.79587
	Mailing Address 827 Michigan Ave	Date of Disbursement MM / DD / YYYY 11 / 13 / 2009
	City South Milwaukee State WI Zip Code 53172	Amount of Each Disbursement this Period 1629.54
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Andrew Davis	Transaction ID: SB30B.79637
	Mailing Address 827 Michigan Ave	Date of Disbursement MM / DD / YYYY 11 / 30 / 2009
	City South Milwaukee State WI Zip Code 53172	Amount of Each Disbursement this Period 1399.08
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3182.72
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Dean Care	Transaction ID: SB30B.79627 Date of Disbursement 11 / 25 / 2009
	Mailing Address PO Box 88610	Amount of Each Disbursement this Period 3629.93
	City Milwaukee State WI Zip Code 53288	
	Purpose of Disbursement Health insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Delta Dental	Transaction ID: SB30B.79628 Date of Disbursement 11 / 25 / 2009
	Mailing Address PO Box 828	Amount of Each Disbursement this Period 440.97
	City Stevens Point State WI Zip Code 54481	
	Purpose of Disbursement Dental insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Delta Dental	Transaction ID: SB30B.79632 Date of Disbursement 11 / 30 / 2009
	Mailing Address PO Box 828	Amount of Each Disbursement this Period 153.39
	City Stevens Point State WI Zip Code 54481	
	Purpose of Disbursement Dental insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4224.29
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Brittany M Denuszek	Transaction ID: SB30B.79589
	Mailing Address 1006 College Ct	Date of Disbursement MM / DD / YYYY 11 / 13 / 2009
	City Madison State WI Zip Code 53715	Amount of Each Disbursement this Period 152.38
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Brittany M Denuszek	Transaction ID: SB30B.79639
	Mailing Address 1006 College Ct	Date of Disbursement MM / DD / YYYY 11 / 30 / 2009
	City Madison State WI Zip Code 53715	Amount of Each Disbursement this Period 100.42
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.79598
	Mailing Address 126 North Blair Street #1	Date of Disbursement MM / DD / YYYY 11 / 13 / 2009
	City Madison State WI Zip Code 53703	Amount of Each Disbursement this Period 1130.76
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1383.56
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Richard Dickie	Transaction ID: SB30B.79648 Date of Disbursement 11 / 30 / 2009
	Mailing Address 126 North Blair Street #1	Amount of Each Disbursement this Period 1084.72
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Amy Harriman	Transaction ID: SB30B.79594 Date of Disbursement 11 / 13 / 2009
	Mailing Address 544 W Main St #206	Amount of Each Disbursement this Period 195.99
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Amy Harriman	Transaction ID: SB30B.79644 Date of Disbursement 11 / 30 / 2009
	Mailing Address 544 W Main St #206	Amount of Each Disbursement this Period 176.27
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1456.98
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Donna Heimbach</p> <p>Mailing Address 3002 Dianne Drive</p> <p>City Middleton State WI Zip Code 53562</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79599</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="792.95"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Donna Heimbach</p> <p>Mailing Address 3002 Dianne Drive</p> <p>City Middleton State WI Zip Code 53562</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79649</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="249.88"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Karoline Hofer</p> <p>Mailing Address 5329 Old Middleton Rd, Apt. 202</p> <p>City Madison State WI Zip Code 53705</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79595</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="634.76"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Karoline Hofer	Transaction ID: SB30B.79645 Date of Disbursement 11 / 30 / 2009
	Mailing Address 5329 Old Middleton Rd, Apt. 202	Amount of Each Disbursement this Period 664.76
	City Madison State WI Zip Code 53705	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mark Jefferson	Transaction ID: SB30B.79585 Date of Disbursement 11 / 13 / 2009
	Mailing Address 1678 Cottonville Avenue	Amount of Each Disbursement this Period 2359.98
	City Arkdale State WI Zip Code 54613	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mark Jefferson	Transaction ID: SB30B.79635 Date of Disbursement 11 / 30 / 2009
	Mailing Address 1678 Cottonville Avenue	Amount of Each Disbursement this Period 2788.62
	City Arkdale State WI Zip Code 54613	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5813.36
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Brian Kind</p> <p>Mailing Address 405 Doral Court</p> <p>City Waunakee State WI Zip Code 53597</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79588</p> <p>Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1770.22</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Brian Kind</p> <p>Mailing Address 405 Doral Court</p> <p>City Waunakee State WI Zip Code 53597</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79638</p> <p>Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1854.46</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jason L Knack</p> <p>Mailing Address 319 Locust St</p> <p>City Onalaska State WI Zip Code 54650</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79650</p> <p>Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 335.66</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3960.34

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Larry Loomis	Transaction ID: SB30B.79601 Date of Disbursement
	Mailing Address 3157 Muir Field Road #47	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City Madison State WI Zip Code 53719	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="463.39"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Larry Loomis	Transaction ID: SB30B.79651 Date of Disbursement
	Mailing Address 3157 Muir Field Road #47	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Madison State WI Zip Code 53719	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="420.19"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ryan Mahoney	Transaction ID: SB30B.79606 Date of Disbursement
	Mailing Address 7608 Hamilton Spring Rd	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City Bethesda State MD Zip Code 20817	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1384.85"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2268.43"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Ryan Mahoney	Transaction ID: SB30B.79658 Date of Disbursement 11 / 30 / 2009
	Mailing Address 7608 Hamilton Spring Rd	Amount of Each Disbursement this Period 1192.47
	City Bethesda State MD Zip Code 20817	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Emily J Monske	Transaction ID: SB30B.79590 Date of Disbursement 11 / 13 / 2009
	Mailing Address 228 Langdon St	Amount of Each Disbursement this Period 131.60
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Emily J Monske	Transaction ID: SB30B.79640 Date of Disbursement 11 / 30 / 2009
	Mailing Address 228 Langdon St	Amount of Each Disbursement this Period 162.32
	City Madison State WI Zip Code 53703	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1486.39
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 911 Panorama Tr S City Rochester State NY Zip Code 14625 Purpose of Disbursement Unemployment tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.79665 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 68.88
B.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 911 Panorama Tr S City Rochester State NY Zip Code 14625 Purpose of Disbursement payroll processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.79667 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 81.07
C.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 911 Panorama Tr S City Rochester State NY Zip Code 14625 Purpose of Disbursement Payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.79669 Date of Disbursement 11 / 13 / 2009 Amount of Each Disbursement this Period 6026.72

SUBTOTAL of Disbursements This Page (optional) ▶

6176.67

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 911 Panorama Tr S City Rochester State NY Zip Code 14625 Purpose of Disbursement Unemployment tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.79659 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 71.12
B.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 911 Panorama Tr S City Rochester State NY Zip Code 14625 Purpose of Disbursement payroll processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.79660 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 87.64
C.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 911 Panorama Tr S City Rochester State NY Zip Code 14625 Purpose of Disbursement Payroll tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.79661 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 5690.23

SUBTOTAL of Disbursements This Page (optional) ▶

5848.99

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A. Full Name (Last, First, Middle Initial) Scott Poole</p> <p>Mailing Address 445 West Gilman #202</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79602</p> <p>Date of Disbursement 11 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 173.01</p>
<p>B. Full Name (Last, First, Middle Initial) Scott Poole</p> <p>Mailing Address 445 West Gilman #202</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79654</p> <p>Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 178.69</p>
<p>C. Full Name (Last, First, Middle Initial) Principal Financial Group</p> <p>Mailing Address PO Box 10372</p> <p>City Des Moines State IA Zip Code 50306</p> <p>Purpose of Disbursement Life insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79629</p> <p>Date of Disbursement 11 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 479.51</p>

SUBTOTAL of Disbursements This Page (optional) ▶

831.21

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Kristin Ruesch

Transaction ID: SB30B.79591
Date of Disbursement

Mailing Address 4218 Nakoma Rd

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

City Madison State WI Zip Code 53711

Amount of Each Disbursement this Period

1608.76

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Kristin Ruesch

Transaction ID: SB30B.79641
Date of Disbursement

Mailing Address 4218 Nakoma Rd

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	9

City Madison State WI Zip Code 53711

Amount of Each Disbursement this Period

1446.16

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Lauren Schroeder

Transaction ID: SB30B.79592
Date of Disbursement

Mailing Address 251 Langdon St

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

City Madison State WI Zip Code 53703

Amount of Each Disbursement this Period

135.00

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

3189.92

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

--

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

<p>A. Full Name (Last, First, Middle Initial) Lauren Schroeder</p> <p>Mailing Address 251 Langdon St</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79642</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Charles Triller</p> <p>Mailing Address 609 East Gorham St #14</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79603</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="349.74"/></p>
<p>C. Full Name (Last, First, Middle Initial) Charles Triller</p> <p>Mailing Address 609 East Gorham St #14</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30B.79655</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="91.23"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="500.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Anton Urso

Transaction ID: SB30B.79604
Date of Disbursement

Mailing Address 405 Nichols Rd

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

City State Zip Code
Monona WI 53716

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Anton Urso

Transaction ID: SB30B.79656
Date of Disbursement

Mailing Address 405 Nichols Rd

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	9

City State Zip Code
Monona WI 53716

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Kristin L Wall

Transaction ID: SB30B.79607
Date of Disbursement

Mailing Address 512 W Fountain St

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

City State Zip Code
Dodgeville WI 53533

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 43 / 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A.

Full Name (Last, First, Middle Initial)
Kristin L Wall

Transaction ID: SB30B.79662
Date of Disbursement

Mailing Address 512 W Fountain St

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	9

City State Zip Code
Dodgeville WI 53533

Amount of Each Disbursement this Period

232.86

Purpose of Disbursement
Payroll

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

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

Transaction ID: SB30B.79605
Date of Disbursement

Mailing Address 641 West Main Street

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	9

City State Zip Code
Madison WI 53703

Amount of Each Disbursement this Period

678.83

Purpose of Disbursement
Payroll

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB30B.79657
Date of Disbursement

Mailing Address 641 West Main Street

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	9

City State Zip Code
Madison WI 53703

Amount of Each Disbursement this Period

524.19

Purpose of Disbursement
Payroll

Category/Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1435.88

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

49390.23

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Charter Communications

Mailing Address
135 South LaSalle Street Dept 8123

City	State	Zip Code
Chicago	IL	60674

Purpose of Disbursement:
Cable tv

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
120878.44

Date / /

Transaction ID: H4.79560

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.17		57.66		67.83

B. Full Name (Last, First, Middle Initial)
Impact Networking Inc.

Mailing Address
PO Box 3090

City	State	Zip Code
Milwaukee	WA	53202

Purpose of Disbursement:
Copier maintenance

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
121150.10

Date / /

Transaction ID: H4.79561

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.75		230.91		271.66

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

Mailing Address
2420 East Springs Dr

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:
Office supplies

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
121516.10

Date / /

Transaction ID: H4.79562

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.90		311.10		366.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.82		599.67		705.49

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Pro One Janitorial Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1486 Kenwood Center			Allocated Activity or Event Year-To-Date 122016.10																						
City	State	Zip Code	Category/ Type																						
Menasha	WI	54952																							
Purpose of Disbursement: Cleaning service			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	0	2	/	2	0	0	9																
Activity or Event Identifier: Administrative			Transaction ID: H4.79564																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

B. Full Name (Last, First, Middle Initial) TDS Metrocom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 1010			Allocated Activity or Event Year-To-Date 122933.95																						
City	State	Zip Code	Category/ Type																						
Monroe	WI	53566																							
Purpose of Disbursement: Phone bill			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	0	2	/	2	0	0	9																
Activity or Event Identifier: Administrative			Transaction ID: H4.79565																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
137.68		780.17		917.85

C. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 25505			Allocated Activity or Event Year-To-Date 123002.32																						
City	State	Zip Code	Category/ Type																						
Lehigh Valley	PA	18002																							
Purpose of Disbursement: Wireless internet			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	0	2	/	2	0	0	9																
Activity or Event Identifier: Administrative			Transaction ID: H4.79566																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.26		58.11		68.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
222.94		1263.28		1486.22

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 East Street SE			Allocated Activity or Event Year-To-Date 124622.32		
City Washington	State DC	Zip Code 20003	Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Database software			Transaction ID: H4.79611		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
243.00		1377.00		1620.00

B. Full Name (Last, First, Middle Initial) AT&T			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 9100			Allocated Activity or Event Year-To-Date 126879.37		
City Aurora	State IL	Zip Code 60507	Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Long distance			Transaction ID: H4.79612		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
338.56		1918.49		2257.05

C. Full Name (Last, First, Middle Initial) FedEx			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1140			Allocated Activity or Event Year-To-Date 126916.73		
City Memphis	State TN	Zip Code 38101	Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Package delivery			Transaction ID: H4.79613		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.60		31.76		37.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
587.16		3327.25		3914.41

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
Great Glacier of Wisconsin

Mailing Address
PO Box 249

City State Zip Code
Lake Delton WI 53940

Purpose of Disbursement:
Bottled water

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

126931.88

Date 11 / 16 / 2009

Transaction ID: H4.79614

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.27		12.88		15.15

B. Full Name (Last, First, Middle Initial)
Green Valley Disposal

Mailing Address
P.O. Box 473

City State Zip Code
Waunakee WI 53597

Purpose of Disbursement:
Waste removal

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

127046.91

Date 11 / 16 / 2009

Transaction ID: H4.79615

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.25		97.78		115.03

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

Mailing Address
PO Box 1231

City State Zip Code
Madison WI 53701

Purpose of Disbursement:
Energy bill

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

127808.15

Date 11 / 16 / 2009

Transaction ID: H4.79617

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.19		647.05		761.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
133.71		757.71		891.42

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial) PostMaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7005			Allocated Activity or Event Year-To-Date 127993.15		
City Madison	State WI	Zip Code 53707	Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: BRM permit fee			Transaction ID: H4.79618		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.75		157.25		185.00

B. Full Name (Last, First, Middle Initial) Shadow Fax			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4601 Helfesen Dr			Allocated Activity or Event Year-To-Date 128274.31		
City Madison	State WI	Zip Code 53718	Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: printer ink			Transaction ID: H4.79619		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.17		238.99		281.16

C. Full Name (Last, First, Middle Initial) Tygris Vendor Finance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dept #1608			Allocated Activity or Event Year-To-Date 128954.02		
City Denver	State CO	Zip Code 80291	Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: copier lease			Transaction ID: H4.79620		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
101.96		577.75		679.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
171.88		973.99		1145.87

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)
JaMark & Associates LLC

Mailing Address
PO Box 722

City State Zip Code
Cedarburg WI 53012

Purpose of Disbursement:
Software license

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

130320.25

Date / /

Transaction ID: H4.79624

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
204.93		1161.30		1366.23

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
204.93		1161.30		1366.23

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
1426.44	8083.20	9509.64