

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 501 11th Avenue East PO Box 1013 Ashland WI 54806

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00553370 3. IS THIS REPORT NEW (N) OR AMENDED (A) WI 07

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 07 / 24 / 2014 through 09 / 30 / 2014

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 Larry McDonald

Signature of Treasurer Larry McDonald [Electronically Filed] Date 01 / 31 / 2015

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Kelly Westlund for Wisconsin**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 24 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	157680.97	469131.66
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	157680.97	468531.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	111568.25	302279.80
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	111568.25	302279.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	165831.86	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Kelly Westlund for Wisconsin**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	96390.74	234926.49
(ii) Unitemized.....	48300.23	187257.17
(iii) TOTAL of contributions from individuals ▶	144690.97	422183.66
(b) Political Party Committees.....	0.00	350.00
(c) Other Political Committees (such as PACs).....	12990.00	46598.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	157680.97	469131.66
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	157680.97	469131.66

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	111568.25	302279.80
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	600.00
(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 20(a), (b), and (c)).....	0.00	600.00
21. OTHER DISBURSEMENTS .....	0.00	220.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	111568.25	303099.80

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	119719.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	157680.97
25. SUBTOTAL (add Line 23 and Line 24).....	277400.11
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	111568.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	165831.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Julie A Adamson**

Mailing Address 4017 Duke St

City Madison State WI Zip Code 53704-3511

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD12QG0**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Joe Agostine**

Mailing Address 1102 Stuntz Ave

City Ashland State WI Zip Code 54806

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD04SV5**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ginger Bentley Alden**

Mailing Address 4405 N Lakeshore Dr

City Wausau State WI Zip Code 54401-7417

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

Name of Employer Wisconsin Public Radio Occupation Director of Major Giving

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD05P20**

Amount of Each Receipt this Period  
**250.00**

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Ginger Bentley Alden**

Mailing Address 4405 N Lakeshore Dr

City Wausau State WI Zip Code 54401-7417

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

Name of Employer Wisconsin Public Radio Occupation Director of Major Giving

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **685.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : VNHWGD0V6T9**

Amount of Each Receipt this Period  
**35.00**

**B.** Full Name (Last, First, Middle Initial)  
**David Allen**

Mailing Address 810 MacArthur Ave

City Ashland State WI Zip Code 54806-2905

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **320.10**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD130Z8**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Bruce H Ambuel Ph.D**

Mailing Address 17570 Saint James Rd

City Brookfield State WI Zip Code 53045-2053

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

Name of Employer Bruce Ambuel Photography LLC Occupation Photographer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : VNHWGCYQQ69**

Amount of Each Receipt this Period  
**500.00**

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

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

**635.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Helen Ambuel**

Mailing Address 17570 Saint James Rd

City Brookfield State WI Zip Code 53045-2053

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

Name of Employer Retired Occupation Retired Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : VNHWCWYJC7**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Aris Anagnos**

Mailing Address 8124 W 3rd St Ste 200

City Los Angeles State CA Zip Code 90048-4341

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

Name of Employer Self Employed Occupation Real Estate Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD0V4S7**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Peggy Anderson**

Mailing Address 5325 Marsh Rd

City Mc Farland State WI Zip Code 53558-8603

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

Name of Employer n/a Occupation housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EQJ1**

Amount of Each Receipt this Period  
100.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Philip D. Anderson**

Mailing Address 12969 E County Road Ff

City State Zip Code  
Maple WI 54854-9341

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
440.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : VNHWCYQQ93**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Anderson**

Mailing Address 225 Ridgeway Dr

City State Zip Code  
Rhineland WI 54501-3236

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2014

**Transaction ID : VNHWD0Q4X6**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Vance R. Andrus**

Mailing Address 13205 S Resort Dr

City State Zip Code  
Conifer CO 80433-5201

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

Name of Employer Occupation  
Andrus Boudreaux Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWD0KR14**

Amount of Each Receipt this Period  
1500.00

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

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

1850.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Eva Apelqvist**

Mailing Address 302 Balsam St

City Spooner State WI Zip Code 54801-1105

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

Name of Employer Self Occupation Author

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWGD0KCC6**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Appel**

Mailing Address 43 Philip Dr

City Princeton State NJ Zip Code 08540-5409

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

Name of Employer Princeton University Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : VNHWGCZ94H0**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Rima D Apple**

Mailing Address 2013 Madison St

City Madison State WI Zip Code 53711-2129

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : VNHWGCYR222**

Amount of Each Receipt this Period  
100.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Rima D Apple**

Mailing Address 2013 Madison St

City Madison State WI Zip Code 53711-2129

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 13 / 2014**

**Transaction ID : VNHWGCZ98Z8**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Rima D Apple**

Mailing Address 2013 Madison St

City Madison State WI Zip Code 53711-2129

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 17 / 2014**

**Transaction ID : VNHWGCZZDE8**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Rima D Apple**

Mailing Address 2013 Madison St

City Madison State WI Zip Code 53711-2129

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2014**

**Transaction ID : VNHWGD0V686**

Amount of Each Receipt this Period  
**50.00**

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

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

**150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 198	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Appleford**

Mailing Address 6284 Clive Ave

City State Zip Code  
Oakland CA 94611-1714

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 05 / 2014**

**Transaction ID : VNHWCYMKM9**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Alan Appleford**

Mailing Address 6284 Clive Ave

City State Zip Code  
Oakland CA 94611-1714

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1YY59**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Rosemary Armstrong**

Mailing Address 3415 W Mullen Ave

City State Zip Code  
Tampa FL 33609-4631

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**09 / 17 / 2014**

**Transaction ID : VNHWCZZDS2**

Amount of Each Receipt this Period  
**500.00**

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Diane Arnold**

Mailing Address 6420 Fisher Ave

City Superior State WI Zip Code 54880-6271

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

Name of Employer Retired Occupation Retired Railroad Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD1KJB5**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Diane Arnold**

Mailing Address 6420 Fisher Ave

City Superior State WI Zip Code 54880-6271

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

Name of Employer Retired Occupation Retired Railroad Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD133C4**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Aronson**

Mailing Address 1542 Riverglen Ave

City Rhinelander State WI Zip Code 54501-2400

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2014

**Transaction ID : VNHWGCYDWX3**

Amount of Each Receipt this Period  
**100.00**

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

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

**200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Baack**

Mailing Address PO Box 358

City Land O Lakes State WI Zip Code 54540-0358

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD04ZY0**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**William Edward Bailey**

Mailing Address 33430 Whiting Rd

City Bayfield State WI Zip Code 54814-4415

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

Name of Employer Self Occupation Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : VNHWGCVKSB5**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**William Edward Bailey**

Mailing Address 33430 Whiting Rd

City Bayfield State WI Zip Code 54814-4415

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

Name of Employer Self Occupation Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EPZ1**

Amount of Each Receipt this Period  
250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Baldauf**

Mailing Address 1518 Wilshire Dr

City Stevens Point State WI Zip Code 54482-8716

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

Name of Employer Retired Occupation Retired Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD13AS2**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kirk Bangstad**

Mailing Address 9684 Island City Point Rd

City Minocqua State WI Zip Code 54548-8762

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

Name of Employer Not Employed Occupation None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2014**

**Transaction ID : VNHWGCVF189**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kirk Bangstad**

Mailing Address 9684 Island City Point Rd

City Minocqua State WI Zip Code 54548-8762

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

Name of Employer Not Employed Occupation None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **531.83**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD112H6**

Amount of Each Receipt this Period  
**431.83**

\* In-Kind: Event Venue Fee

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

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

**631.83**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Laird Barber</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 419 W 10th St		<b>Transaction ID : VNHWGCZQ173</b>
City State Zip Code Morris MN 56267-1707	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 400.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Brian Bartel</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1043 S Webster Ave		<b>Transaction ID : VNHWGCVYYJ9</b>
City State Zip Code Green Bay WI 54301-3213	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 250.00
Name of Employer Weather Gauge LLC	Occupation Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Brian Bartel</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 1043 S Webster Ave		<b>Transaction ID : VNHWGD0V4Z4</b>
City State Zip Code Green Bay WI 54301-3213	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 500.00
Name of Employer Weather Gauge LLC	Occupation Engineer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 600.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Kelly Westlund for Wisconsin**

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

Mailing Address 814 Fulton St  
# 226

City Wausau State WI Zip Code 54403-4969

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

Name of Employer Aspirus Wausau Hospital Occupation Physician (Oncology)

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 17 / 2014

**Transaction ID : VNHWGCZJPP8**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Bob Beck**

Mailing Address 2312 Weston Ave

City Schofield State WI Zip Code 54476-5062

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

Name of Employer N/A Occupation Retired Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 26 / 2014

**Transaction ID : VNHWGCV8CF3**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Bob Beck**

Mailing Address 2312 Weston Ave

City Schofield State WI Zip Code 54476-5062

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

Name of Employer N/A Occupation Retired Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 26 / 2014

**Transaction ID : VNHWGCY8MF7**

Amount of Each Receipt this Period  
50.00

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

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

600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Bob Beck**

Mailing Address 2312 Weston Ave

City State Zip Code  
Schofield WI 54476-5062

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

Name of Employer Occupation  
N/A Retired Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWGD0V637**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**James Becker**

Mailing Address 94 Juniper Rd

City State Zip Code  
Belmont MA 02478-2034

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

Name of Employer Occupation  
Skanska Usa Building Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 16 / 2014

**Transaction ID : VNHWGCWYQA3**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Ronald Becker**

Mailing Address 2130 95th St S

City State Zip Code  
Wisconsin Rapids WI 54494-8681

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

Name of Employer Occupation  
Retired Retired Civil Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1KFK0**

Amount of Each Receipt this Period  
100.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Ray Bellamy MD**

Mailing Address 509 Vinnedge Ride

City Tallahassee	State FL	Zip Code 32303-5141
---------------------	-------------	------------------------

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

Name of Employer Tallahassee Orthopedic Clinic	Occupation Physician
---	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**513.14**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 04 / 2014**

**Transaction ID : VNHWCWEER8**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ray Bellamy MD**

Mailing Address 509 Vinnedge Ride

City Tallahassee	State FL	Zip Code 32303-5141
---------------------	-------------	------------------------

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

Name of Employer Tallahassee Orthopedic Clinic	Occupation Physician
---	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**563.14**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 13 / 2014**

**Transaction ID : VNHGCWYKP8**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ray Bellamy MD**

Mailing Address 509 Vinnedge Ride

City Tallahassee	State FL	Zip Code 32303-5141
---------------------	-------------	------------------------

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

Name of Employer Tallahassee Orthopedic Clinic	Occupation Physician
---	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**663.14**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 28 / 2014**

**Transaction ID : VNHWCY8NN5**

Amount of Each Receipt this Period  
**100.00**

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

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

**650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Ray Bellamy MD</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 509 Vinnedge Ride		<b>Transaction ID : VNHWGCZ99A5</b>
City Tallahassee	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Tallahassee Orthopedic Clinic	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 713.14	

Full Name (Last, First, Middle Initial) <b>B. Lawrence Benenson</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 708 3rd Ave # 28		<b>Transaction ID : VNHWGCYMMH8</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Benenson Capital	Occupation Partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>C. Mitchell Bent</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 716 Eastview Dr		<b>Transaction ID : VNHWGCZ9556</b>
City Antigo	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Neal Berger**

Mailing Address 4141 N Murray Ave

City Milwaukee State WI Zip Code 53211-2011

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

Name of Employer Retired Occupation Retired Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 24 / 2014**

**Transaction ID : VNHWGD0V5B7**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Allan W Bernat**

Mailing Address 7015 Highland Dr Apt 3

City Wausau State WI Zip Code 54401-8639

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 24 / 2014**

**Transaction ID : VNHWGCV8BX1**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Allan W Bernat**

Mailing Address 7015 Highland Dr Apt 3

City Wausau State WI Zip Code 54401-8639

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : VNHWGCWEG11**

Amount of Each Receipt this Period  
**100.00**

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>Allan W Bernat</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014	
Mailing Address 7015 Highland Dr Apt 3		<b>Transaction ID : VNHWGCDQP7</b>	
City Wausau	State WI	Zip Code 54401-8639	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Not employed		Occupation Not employed	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 650.00	

Full Name (Last, First, Middle Initial) <b>Allan W Bernat</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 7015 Highland Dr Apt 3		<b>Transaction ID : VNHWGCY8NW1</b>	
City Wausau	State WI	Zip Code 54401-8639	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Not employed		Occupation Not employed	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 900.00	

Full Name (Last, First, Middle Initial) <b>Allan W Bernat</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 7015 Highland Dr Apt 3		<b>Transaction ID : VNHWGCZ94X5</b>	
City Wausau	State WI	Zip Code 54401-8639	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Not employed		Occupation Not employed	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Allan W Bernat**

Mailing Address 7015 Highland Dr  
Apt 3

City Wausau State WI Zip Code 54401-8639

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD05Q07**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary Jo Berner**

Mailing Address PO Box 189

City Eagle River State WI Zip Code 54521-0189

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2014

**Transaction ID : VNHWGD0Q4Z2**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**William Berry**

Mailing Address 511 N Anton Ave

City Marshfield State WI Zip Code 54449-3904

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

Name of Employer Dental Clinic of Marshfield Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : VNHWGCVHA60**

Amount of Each Receipt this Period  
500.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Mary E Bills</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3406 Bailer Hill Rd		<b>Transaction ID : VNHWGD1TMF3</b>
City State Zip Code Friday Harbor WA 98250-8202	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1650.00
Name of Employer Occupation Retired Retired	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 1650.00		

Full Name (Last, First, Middle Initial) <b>B. Charles Block</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 7267W Lanice Ln		<b>Transaction ID : VNHWGD15042</b>
City State Zip Code Winter WI 54896-6202	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Occupation Retired Retired	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Gay Block</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 1530 Bishops Lodge Rd # 310		<b>Transaction ID : VNHWGCY8NF8</b>
City State Zip Code Santa Fe NM 87506-0005	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Occupation Self Employed Artist	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1900.00
<b>TOTAL</b> This Period (last page this line number only).....	1900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A. Gay Block**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1530 Bishops Lodge Rd # 310  
 City Santa Fe State NM Zip Code 87506-0005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Artist  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2014  
**Transaction ID : VNHWGCZ99E6**  
 Amount of Each Receipt this Period  
 50.00

**B. Patricia Bloodgood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 Greenway Gables  
 City Minneapolis State MN Zip Code 55403-2145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Zimmerman Reed LLC Occupation Attorney  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : VNHWGD1EPY3**  
 Amount of Each Receipt this Period  
 250.00

**C. Patricia Bloodgood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 Greenway Gables  
 City Minneapolis State MN Zip Code 55403-2145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Zimmerman Reed LLC Occupation Attorney  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : VNHWGD1EQN5**  
 Amount of Each Receipt this Period  
 100.00

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

400.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

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

Mailing Address 1700 Hunter Hill Rd

City Hudson State WI Zip Code 54016

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **271.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : VNHWCWEGE4**

Amount of Each Receipt this Period  
**21.00**

**B.** Full Name (Last, First, Middle Initial)  
**Paul Bode**

Mailing Address 1700 Hunter Hill Rd

City Hudson State WI Zip Code 54016

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **371.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 17 / 2014**

**Transaction ID : VNHWCZJW98**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Lisa Boero**

Mailing Address 500 N Schmidt Ave

City Marshfield State WI Zip Code 54449-1741

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 28 / 2014**

**Transaction ID : VNHWCXZ6J9**

Amount of Each Receipt this Period  
**250.00**

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

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

**371.00**

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

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

FOR LINE NUMBER: PAGE 26 OF 198  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Boffa**

Mailing Address 78 Oscaleta Rd

City South Salem State NY Zip Code 10590-1005

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : VNHWGCWEEK8**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Gary Bohn**

Mailing Address 12168 State Road 48

City Grantsburg State WI Zip Code 54840-8826

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : VNHWGCYFGP7**

Amount of Each Receipt this Period  
 1050.00

**C.** Full Name (Last, First, Middle Initial)  
**John Bonsett-Veal**

Mailing Address 425 W Washington Ave

City Madison State WI Zip Code 53703-2703

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

Name of Employer Self Occupation Optomitrist

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2014

**Transaction ID : VNHWGCX4257**

Amount of Each Receipt this Period  
 200.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Borchardt**

Mailing Address 11885 Prairie Hill Trl

City Marshfield State WI Zip Code 54449-9455

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

Name of Employer: USDA-Agricultural Research Service  
Occupation: Research Microbiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 425.00

Date of Receipt: 09 / 30 / 2014

**Transaction ID : VNHWGD1KFH4**

Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Adrian R Bourque**

Mailing Address 722 Parcher St

City Wausau State WI Zip Code 54403-4200

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

Name of Employer: Marshfield Clinic  
Occupation: Radiation Oncologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1100.00

Date of Receipt: 08 / 20 / 2014

**Transaction ID : VNHWGCXDRB2**

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Adrian R Bourque**

Mailing Address 722 Parcher St

City Wausau State WI Zip Code 54403-4200

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

Name of Employer: Marshfield Clinic  
Occupation: Radiation Oncologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1150.00

Date of Receipt: 09 / 15 / 2014

**Transaction ID : VNHWGCZZ9H2**

Amount of Each Receipt this Period: 50.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Adrian R Bourque</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014	
Mailing Address 722 Parcher St		<b>Transaction ID : VNHWGD097T8</b>	
City Wausau	State WI	Zip Code 54403-4200	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Marshfield Clinic	Occupation Radiation Oncologist		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1350.00		

Full Name (Last, First, Middle Initial) <b>B. Jeff Bowen</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 2602 Balden St		<b>Transaction ID : VNHWGD14YW6</b>	
City Madison	State WI	Zip Code 53713-1027	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Pekins Cole LLP	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Dean Bowles</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 1403 Joyce Rd		<b>Transaction ID : VNHWGCZZ516</b>	
City Monona	State WI	Zip Code 53716-2950	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer University of Wisconsin	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 320.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Dean Bowles**

Mailing Address 1403 Joyce Rd

City Monona State WI Zip Code 53716-2950

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

Name of Employer University of Wisconsin Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **370.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1ERD5**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**James Bray**

Mailing Address 2041 Hickory Rd

City Mosinee State WI Zip Code 54455-9384

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **725.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 24 / 2014**

**Transaction ID : VNHWGCV8BK2**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**James Bray**

Mailing Address 2041 Hickory Rd

City Mosinee State WI Zip Code 54455-9384

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **775.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 26 / 2014**

**Transaction ID : VNHWGCV8BM0**

Amount of Each Receipt this Period  
**50.00**

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

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

**150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**James Bray**

Mailing Address 2041 Hickory Rd

City Mosinee State WI Zip Code 54455-9384

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **825.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 24 / 2014**

**Transaction ID : VNHWCXDSH1**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**James Bray**

Mailing Address 2041 Hickory Rd

City Mosinee State WI Zip Code 54455-9384

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **875.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 14 / 2014**

**Transaction ID : VNHWCZ9A40**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**James Bray**

Mailing Address 2041 Hickory Rd

City Mosinee State WI Zip Code 54455-9384

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **910.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD0V6K3**

Amount of Each Receipt this Period  
**35.00**

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

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

**135.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**James Bray**

Mailing Address 2041 Hickory Rd

City Mosinee State WI Zip Code 54455-9384

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : VNHWGD097V5**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 1060.00

**B.** Full Name (Last, First, Middle Initial)  
**James Bray**

Mailing Address 2041 Hickory Rd

City Mosinee State WI Zip Code 54455-9384

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : VNHWGD0V603**

Amount of Each Receipt this Period  
 50.00

Amount of Each Receipt this Period  
 1060.00

**C.** Full Name (Last, First, Middle Initial)  
**Christine A Bremer Muggli Esq.**

Mailing Address 3909 Pine Siskin Ln

City Wausau State WI Zip Code 54401-6400

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

Name of Employer Bremer & Trollop, SC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 24 / 2014

**Transaction ID : VNHWGCXDSG3**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 500.00

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 32 OF 198  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Doris Brewster**

Mailing Address 2638 6-5 3/4 Ave

City State Zip Code  
New Auburn WI 54757

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : VNHWGCZ0R81**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronald Brewster**

Mailing Address 2638 6-5 3/4 Ave

City State Zip Code  
New Auburn WI 54757

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : VNHWGCZ0R73**

Amount of Each Receipt this Period  
700.00

**C.** Full Name (Last, First, Middle Initial)  
**Cheryl Brickman**

Mailing Address 3200 W Bonniwell Rd

City State Zip Code  
Mequon WI 53097-1628

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

Name of Employer Occupation  
Dragonfly Farm Design Biologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD05617**

Amount of Each Receipt this Period  
500.00

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

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

1700.00



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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 33 OF 198

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Demaris Brinton**

Mailing Address PO Box 1192

City Bayfield State WI Zip Code 54814-1192

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

Name of Employer Apostle Island Booksellers Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : VNHWGCVKSP2**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Demaris Brinton**

Mailing Address PO Box 1192

City Bayfield State WI Zip Code 54814-1192

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

Name of Employer Apostle Island Booksellers Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1ER44**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Alison Brooks**

Mailing Address 1802 Monroe St  
 Unit 409

City Madison State WI Zip Code 53711-2028

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

Name of Employer UW-Madison Occupation Teaching Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1131.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD0V4Y7**

Amount of Each Receipt this Period  
**250.00**

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

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

**350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Andrea Brown**

Mailing Address 1478 Lakehurst Rd

City Mosinee State WI Zip Code 54455-9330

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 06 / 2014

**Transaction ID : VNHWGCYP4C9**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Andrea Brown**

Mailing Address 1478 Lakehurst Rd

City Mosinee State WI Zip Code 54455-9330

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD05RJ2**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Elaine Burke**

Mailing Address W308N6183 Shore Acres Rd

City Hartland State WI Zip Code 53029-8723

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 14 / 2014

**Transaction ID : VNHWGCZ9A32**

Amount of Each Receipt this Period  
**500.00**

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

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

**850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Charles M Burton**

Mailing Address **PO Box 101**

City **Washburn** State **WI** Zip Code **54891-0101**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : VNHWCVKR73**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Wolfgang Cahn**

Mailing Address **2401 W Jackson St  
Apt 52**

City **Merrill** State **WI** Zip Code **54452-4201**

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

Name of Employer **Retired** Occupation **Retired Teacher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 14 / 2014**

**Transaction ID : VNHWCZ7GP8**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Wolfgang Cahn**

Mailing Address **2401 W Jackson St  
Apt 52**

City **Merrill** State **WI** Zip Code **54452-4201**

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

Name of Employer **Retired** Occupation **Retired Teacher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1KFN6**

Amount of Each Receipt this Period  
**100.00**

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

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

**650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Colleen Callahan**

Mailing Address 600 Grandview Dr

City Hudson State WI Zip Code 54016-5825

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **185.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 24 / 2014**

**Transaction ID : VNHWGCV0XJ1**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Colleen Callahan**

Mailing Address 600 Grandview Dr

City Hudson State WI Zip Code 54016-5825

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD15WT3**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Campbell**

Mailing Address 1016 W Blodgett St

City Marshfield State WI Zip Code 54449-1712

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : VNHWGCXBSG8**

Amount of Each Receipt this Period  
**25.00**

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

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

**175.00**

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

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

FOR LINE NUMBER: PAGE 37 OF 198  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**John Campbell**

Mailing Address 1016 W Blodgett St

City Marshfield State WI Zip Code 54449-1712

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 14 / 2014

**Transaction ID : VNHWGCZ9AR8**

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
**John Campbell**

Mailing Address 1016 W Blodgett St

City Marshfield State WI Zip Code 54449-1712

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD0KFH2**

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
**John Campbell**

Mailing Address 1016 W Blodgett St

City Marshfield State WI Zip Code 54449-1712

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
345.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1ERZ7**

Amount of Each Receipt this Period  
35.00

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

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

110.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**John Campbell**

Mailing Address 1016 W Blodgett St

City	State	Zip Code
Marshfield	WI	54449-1712

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

Name of Employer	Occupation
N/A	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
345.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1ES13**

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
**Margaret Carroll**

Mailing Address 910 E College Ave

City	State	Zip Code
Appleton	WI	54911-5622

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

Name of Employer	Occupation
N/A	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : VNHWGCWYK05**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Margaret Carroll**

Mailing Address 910 E College Ave

City	State	Zip Code
Appleton	WI	54911-5622

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

Name of Employer	Occupation
N/A	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : VNHWGCZZ4B3**

Amount of Each Receipt this Period  
200.00

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

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

335.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Karen A Case Esq.**

Mailing Address 9803 W Meadow Park Dr

City Hales Corners State WI Zip Code 53130-2261

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

Name of Employer n/a Occupation Retired Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : VNHWGCZ0TQ2**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**James G. Caya**

Mailing Address 8156 Stagecoach Rd

City Cross Plains State WI Zip Code 53528-9797

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

Name of Employer Med Assessment and Consultation Occupation Physician/Founder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : VNHWGCWA3E3**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kelly Centofanti**

Mailing Address W4474 River Rd

City Fredonia State WI Zip Code 53021-9237

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

Name of Employer CENTOFANTI LAW SC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : VNHWGCZQ1E8**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 40 OF 198

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Cheesebro**

Mailing Address N4561 Duck Creek Rd

City Helenville State WI Zip Code 53137-9791

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

Name of Employer Self Occupation Retired, Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 06 / 2014

**Transaction ID : VNHWGCRYR3P0**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Joyce Chekouras**

Mailing Address 1426 Lake Dr

City Rosholt State WI Zip Code 54473

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 25 / 2014

**Transaction ID : VNHWGCDKG0**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Chisholm**

Mailing Address 316 W Spruce St

City Chippewa Falls State WI Zip Code 54729-1734

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 19 / 2014

**Transaction ID : VNHWGCDQR2**

Amount of Each Receipt this Period  
 100.00

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

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

850.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Chisholm**

Mailing Address 316 W Spruce St

City Chippewa Falls State WI Zip Code 54729-1734

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 14 / 2014

**Transaction ID : VNHWGCZ9A99**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Scott Clark**

Mailing Address PO Box 389  
PO Box 389

City Ashland State WI Zip Code 54806-0389

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

Name of Employer Clark and Clark LLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD05N86**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Cleveland**

Mailing Address 20 W 72nd St  
Apt 506

City New York State NY Zip Code 10023-4100

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

Name of Employer Columbia University SIPA Occupation adjunct professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
513.33

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 06 / 2014

**Transaction ID : VNHWGCYR3N2**

Amount of Each Receipt this Period  
250.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Nicholas Cohen**

Mailing Address 140 W 22nd St  
Apt 7B

City State Zip Code  
New York NY 10011-2789

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

Name of Employer Occupation  
BNP Paribas Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.01**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 28 / 2014**

**Transaction ID : VNHWGD0V4W1**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Henry Cole**

Mailing Address 627 W 8th St

City State Zip Code  
Washburn WI 54891

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**475.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 02 / 2014**

**Transaction ID : VNHWGCVZ4Z4**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Henry Cole**

Mailing Address 627 W 8th St

City State Zip Code  
Washburn WI 54891

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : VNHWGCXDRV9**

Amount of Each Receipt this Period  
**25.00**

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

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

**550.00**

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

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

FOR LINE NUMBER: PAGE 43 OF 198  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Henry Cole**  
 Mailing Address 627 W 8th St  
 City Washburn State WI Zip Code 54891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : VNHWGCYR068**  
 Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Henry Cole**  
 Mailing Address 627 W 8th St  
 City Washburn State WI Zip Code 54891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **560.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : VNHWGCZ94W7**  
 Amount of Each Receipt this Period  
**35.00**

**C.** Full Name (Last, First, Middle Initial)  
**Henry Cole**  
 Mailing Address 627 W 8th St  
 City Washburn State WI Zip Code 54891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **585.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014  
**Transaction ID : VNHWGD0V6Y0**  
 Amount of Each Receipt this Period  
**25.00**

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

**85.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Henry Cole**

Mailing Address 627 W 8th St

City Washburn State WI Zip Code 54891

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **620.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNHWGD1ERY9**

Amount of Each Receipt this Period  
**35.00**

**B.** Full Name (Last, First, Middle Initial)  
**Joanne Coleman**

Mailing Address 1448 State Hwy 46

City Balsam Lake State WI Zip Code 54810

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : VNHWGCZZDJ9**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Joanne Coleman**

Mailing Address 1448 State Hwy 46

City Balsam Lake State WI Zip Code 54810

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWGD0KAC2**

Amount of Each Receipt this Period  
**100.00**

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

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

**185.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Jim Collie**

Mailing Address 4235 Mackland Ave NE

City Albuquerque State NM Zip Code 87110-7715

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

Name of Employer None Occupation Presbyterian Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2014

**Transaction ID : VNHWCWEGP7**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jim Collie**

Mailing Address 4235 Mackland Ave NE

City Albuquerque State NM Zip Code 87110-7715

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

Name of Employer None Occupation Presbyterian Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : VNHWCZZ9D0**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Collie**

Mailing Address 4235 Mackland Ave NE

City Albuquerque State NM Zip Code 87110-7715

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

Name of Employer None Occupation Presbyterian Minister

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWD0MFB3**

Amount of Each Receipt this Period  
 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Joanne Collins**

Mailing Address 86360 Meyers Olson Rd

City Bayfield State WI Zip Code 54814-4510

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : VNHWGCVKTD4**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carlyn E Conway**

Mailing Address 340 Garfield Ave

City Eau Claire State WI Zip Code 54701

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 18 / 2014**

**Transaction ID : VNHWGCZQ759**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Cook**

Mailing Address PO Box 99

City Birchwood State WI Zip Code 54817-0099

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : VNHWGCXDS72**

Amount of Each Receipt this Period  
**250.00**

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

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

**500.00**

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

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

FOR LINE NUMBER: PAGE 47 OF 198  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth Coppola**

Mailing Address 3400 S 43rd St

City Milwaukee State WI Zip Code 53219-4844

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

Name of Employer Student Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
305.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EZP8**

Amount of Each Receipt this Period  
5.00

**B.** Full Name (Last, First, Middle Initial)  
**Audrey Costerisan**

Mailing Address PO Box 545  
23328 Nyren Road

City Siren State WI Zip Code 54872-0545

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : VNHWGCYVYQ35**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Audrey Costerisan**

Mailing Address PO Box 545  
23328 Nyren Road

City Siren State WI Zip Code 54872-0545

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : VNHWGCYFGJ6**

Amount of Each Receipt this Period  
1000.00

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

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

1505.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Costerisan**

Mailing Address **PO Box 545**

City **Siren** State **WI** Zip Code **54872-0545**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 29 / 2014**

**Transaction ID : VNHWGCVG6G1**

Amount of Each Receipt this Period  
**1500.00**

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

Mailing Address **PO Box 545**

City **Siren** State **WI** Zip Code **54872-0545**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 05 / 2014**

**Transaction ID : VNHWGCVFGE4**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Sheila Coyle**

Mailing Address **360 W Washington Ave  
Unit 1007**

City **Madison** State **WI** Zip Code **53703-2766**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : VNHWGCVKRH2**

Amount of Each Receipt this Period  
**250.00**

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

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

**2750.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Sheila Coyle**

Mailing Address 360 W Washington Ave  
Unit 1007

City Madison State WI Zip Code 53703-2766

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**628.15**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 04 / 2014**

**Transaction ID : VNHWCYB6E3**

Amount of Each Receipt this Period  
**78.15**

\* In-Kind: Food

**B.** Full Name (Last, First, Middle Initial)  
**Sheila Coyle**

Mailing Address 360 W Washington Ave  
Unit 1007

City Madison State WI Zip Code 53703-2766

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**663.15**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1ES62**

Amount of Each Receipt this Period  
**35.00**

**C.** Full Name (Last, First, Middle Initial)  
**Patrick L. Crooks Esq.**

Mailing Address 1510 Adams Ct

City Wausau State WI Zip Code 54403-5054

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

Name of Employer Crooks Low & Connell Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 22 / 2014**

**Transaction ID : VNHWGCZZ4H0**

Amount of Each Receipt this Period  
**250.00**

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

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

**363.15**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Karen Ruedi Crowell**

Mailing Address 33675 Frostman Rd

City	State	Zip Code
Washburn	WI	54891-4440

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2014

**Transaction ID : VNHWGCDQM1**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

**B.** Full Name (Last, First, Middle Initial)  
**Karen Ruedi Crowell**

Mailing Address 33675 Frostman Rd

City	State	Zip Code
Washburn	WI	54891-4440

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EQH3**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Lewis Daniels**

Mailing Address 113 S Linden Ave

City	State	Zip Code
South San Francisco	CA	94080-6410

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

Name of Employer	Occupation
Planet Pooch / Self	Doggie Daycare Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : VNHWGCWYK54**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

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

\_\_\_\_\_ 1150.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Dart**

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer Marshfield Clinic Research Foundation Occupation Emertius Researcher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 04 / 2014**

**Transaction ID : VNHWCWEES5**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer Marshfield Clinic Research Foundation Occupation Emertius Researcher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : VNHWCWEGZ8**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Richard Dart**

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer Marshfield Clinic Research Foundation Occupation Emertius Researcher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 13 / 2014**

**Transaction ID : VNHWCWYMF6**

Amount of Each Receipt this Period  
**100.00**

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

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

**200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Dart**

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer Marshfield Clinic Research Foundation Occupation Emertius Researcher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **725.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : VNHWGCYR287**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer Marshfield Clinic Research Foundation Occupation Emertius Researcher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **825.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : VNHWGCZCNO**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Richard Dart**

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer Marshfield Clinic Research Foundation Occupation Emertius Researcher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **925.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD0V584**

Amount of Each Receipt this Period  
**100.00**

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

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

**300.00**

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

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

FOR LINE NUMBER: PAGE 53 OF 198  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     11e 15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Dart**

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer Marshfield Clinic Research Foundation Occupation Emertius Researcher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **960.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : VNHWGD1ERX1**

Amount of Each Receipt this Period  
**35.00**

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

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer Marshfield Clinic Research Foundation Occupation Emertius Researcher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1010.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1ER93**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Wendy M Dart**

Mailing Address 9050 Ader Rd

City Marshfield State WI Zip Code 54449

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1916.47**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 28 / 2014**

**Transaction ID : VNHWGCXZ571**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1085.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Eugene Degner**

Mailing Address 956 Cedar St

City State Zip Code  
Minocqua WI 54548-9242

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWGD0KEJ7**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Dennis C. Delwiche**

Mailing Address 12399 W State Road 48

City State Zip Code  
Exeland WI 54835

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : VNHWGD0V629**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephanie Lynn Deuser**

Mailing Address 1207 W 4th St

City State Zip Code  
Marshfield WI 54449-2507

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

Name of Employer Occupation  
St. Joseph Hospital RN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : VNHWGCXZ6A6**

Amount of Each Receipt this Period  
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Devins**

Mailing Address 1489 Leafmore Pl

City State Zip Code  
Decatur GA 30033-2050

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2014

**Transaction ID : VNHWCWTZQ1**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Carl Doersch**

Mailing Address 1016 MacArthur Ave

City State Zip Code  
Ashland WI 54806-2909

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
247.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : VNHWCY8DY0**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Ross W Draeger**

Mailing Address 7720 N Merrie Ln

City State Zip Code  
Fox Point WI 53217-2962

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

Name of Employer Occupation  
Self Graphic Artist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2014

**Transaction ID : VNHWCX6V71**

Amount of Each Receipt this Period  
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Duane Dubey**

Mailing Address **W13890 E Swede Town Rd**

City **Alma Center** State **WI** Zip Code **54611-8110**

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

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**235.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD0V542**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**John Dudley**

Mailing Address **1962 River Vista Dr**

City **Mosinee** State **WI** Zip Code **54455-8638**

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

Name of Employer **Dudley Broadcasting Management** Occupation **TV Station Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : VNHWGCYQQR2**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Patrick Duffy**

Mailing Address **900 6th Ave W**

City **Ashland** State **WI** Zip Code **54806-3015**

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

Name of Employer **United Health Care** Occupation **Claims Adjustor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1218.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : VNHWGD1EVF7**

Amount of Each Receipt this Period  
**10.00**

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

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

**210.00**



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

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

FOR LINE NUMBER: PAGE 57 OF 198  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick Duffy**

Mailing Address 900 6th Ave W

City Ashland State WI Zip Code 54806-3015

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

Name of Employer United Health Care Occupation Claims Adjustor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1223.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EZNO**

Amount of Each Receipt this Period  
5.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert J Dunne Jr.**

Mailing Address 1615 10th Ave W

City Ashland State WI Zip Code 54806-3773

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : VNHWGCVKJ4**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Joanne Dwyer**

Mailing Address 123 Floodwood Rd

City Saranac Lake State NY Zip Code 12983-3219

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : VNHWGCW49W9**

Amount of Each Receipt this Period  
300.00

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

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

405.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Joanne Dwyer**

Mailing Address 123 Floodwood Rd

City Saranac Lake State NY Zip Code 12983-3219

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : VNHWGD0CS96**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas R. Eastman**

Mailing Address 411 Windwood Cir

City Edgerton State WI Zip Code 53534-9504

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : VNHWGD0V502**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Frederick L Ehrke**

Mailing Address 224 Knoll Ct

City Deerfield State WI Zip Code 53531-9524

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : VNHWGD0CS05**

Amount of Each Receipt this Period  
200.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Donald Ekstrom**

Mailing Address 1000 Superior Ave

City Washburn State WI Zip Code 54891-3407

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 20 / 2014**

**Transaction ID : VNHWCX4YF5**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**John Elder**

Mailing Address 717 Wadleigh St

City Stevens Point State WI Zip Code 54481-1438

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2014**

**Transaction ID : VNHWCX1HM3**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Paul Ellingson**

Mailing Address W 725 County Road D  
PO Box 326

City Birchwood State WI Zip Code 54817-9156

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

Name of Employer Retired Occupation Social Worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 25 / 2014**

**Transaction ID : VNHWCV8CD7**

Amount of Each Receipt this Period  
**100.00**

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

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

**500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

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

Mailing Address **W 725 County Road D**  
**PO Box 326**

City **Birchwood** State **WI** Zip Code **54817-9156**

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

Name of Employer **Retired** Occupation **Social Worker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**255.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD0V5Q2**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Edward Esty**

Mailing Address **4701 Willard Ave**  
**Apt 635**

City **Chevy Chase** State **MD** Zip Code **20815-4616**

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

Name of Employer **Self Employed** Occupation **Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 07 / 2014**

**Transaction ID : VNHWGCWEG45**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Elisa Farmilant**

Mailing Address **PO Box 349**

City **Arbor Vitae** State **WI** Zip Code **54568-0349**

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

Name of Employer **Justin Engineering, Inc** Occupation **Office Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**370.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1ESG9**

Amount of Each Receipt this Period  
**35.00**

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

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

**585.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Andy Fisher**

Mailing Address 30296 122nd St

City State Zip Code  
New Auburn WI 54757-5275

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

Name of Employer Occupation  
ECASD Teacher/ECAE President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1TME6**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Parker C. Folsie**

Mailing Address 4895 Rose Ave NE

City State Zip Code  
Bainbridge Island WA 98110-2141

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

Name of Employer Occupation  
Susman Godfrey Llp Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 16 / 2014

**Transaction ID : VNHWGCWVW77**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Force**

Mailing Address 515 Franklin St

City State Zip Code  
Wausau WI 54403-4724

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

Name of Employer Occupation  
Zimpro Advertising Dir

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : VNHWGCV8BA1**

Amount of Each Receipt this Period  
100.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Melanie Franklin**

Mailing Address N7930 Hi Line Ave

City Spencer State WI Zip Code 54479-9048

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

Name of Employer Self Occupation Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : VNHWCWEJT3**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Melanie Franklin**

Mailing Address N7930 Hi Line Ave

City Spencer State WI Zip Code 54479-9048

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

Name of Employer Self Occupation Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **344.15**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2014

**Transaction ID : VNHWCX3SF7**

Amount of Each Receipt this Period  
**44.15**

\* In-Kind: food for thorp event

**C.** Full Name (Last, First, Middle Initial)  
**Melanie Franklin**

Mailing Address N7930 Hi Line Ave

City Spencer State WI Zip Code 54479-9048

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

Name of Employer Self Occupation Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **544.15**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : VNHWD0B545**

Amount of Each Receipt this Period  
**200.00**

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

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

**344.15**

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

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

FOR LINE NUMBER: PAGE 63 OF 198  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Georgette Frazer**

Mailing Address D1366 Mann St

City Marshfield State WI Zip Code 54449-8308

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

Name of Employer Retired Occupation Retired CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : VNHWCXZ6W8**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 450.00

**B.** Full Name (Last, First, Middle Initial)  
**Bryan Freedman**

Mailing Address 969 Page St

City San Francisco State CA Zip Code 94117-2318

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

Name of Employer Adelard And Edwards, Inc Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : VNHWCZZDK7**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Bruce James Fuentes**

Mailing Address 8873 E Moonshine Rd

City South Range State WI Zip Code 54874-8841

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

Name of Employer None Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : VNHWCVAVG9**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 1000.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Robyn Gabel**

Mailing Address 905 Forest Ave

City Evanston State IL Zip Code 60202-5405

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

Name of Employer State Of Illinois Occupation State Representative

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : VNHWGD0V4T5**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Roger Ganschow**

Mailing Address 8570 E Bakely Cir

City Minocqua State WI Zip Code 54548-9535

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWGD0KGS8**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Colleen Geisen**

Mailing Address 610 Hillside Dr

City Washburn State WI Zip Code 54891-9504

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

Name of Employer Mellen School District Occupation Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
381.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : VNHWGCZTYK4**

Amount of Each Receipt this Period  
100.00

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

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

700.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**C Daniel Geisler**

Mailing Address 111 N Oak Grove Dr

City Madison State WI Zip Code 53717-2519

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2014**

**Transaction ID : VNHWCXDQG9**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Georgeson**

Mailing Address 150 E Wisconsin Ave

City Oconomowoc State WI Zip Code 53066-3061

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 12 / 2014**

**Transaction ID : VNHGCWYJY9**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Georgeson**

Mailing Address 150 E Wisconsin Ave

City Oconomowoc State WI Zip Code 53066-3061

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **185.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : VNHGCXDS08**

Amount of Each Receipt this Period  
**35.00**

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

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

**1085.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Georgeson**

Mailing Address 150 E Wisconsin Ave

City Oconomowoc State WI Zip Code 53066-3061

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 12 / 2014

**Transaction ID : VNHWGCZ97T7**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Georgeson**

Mailing Address 150 E Wisconsin Ave

City Oconomowoc State WI Zip Code 53066-3061

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
242.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD0V8E7**

Amount of Each Receipt this Period  
7.00

**C.** Full Name (Last, First, Middle Initial)  
**Theo Giesy**

Mailing Address 4411 Colonial Ave

City Norfolk State VA Zip Code 23508-2805

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 21 / 2014

**Transaction ID : VNHWGCX6V63**

Amount of Each Receipt this Period  
350.00

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

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

407.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Gillespie**

Mailing Address 210 Eastbank Ct N

City Hudson State WI Zip Code 54016-1083

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 26 / 2014**

**Transaction ID : VNHWCXMFC4**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Cynthia Grant**

Mailing Address 4327 43rd St NW

City Washington State DC Zip Code 20016-2413

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

Name of Employer GAO Occupation Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 15 / 2014**

**Transaction ID : VNHGCWYPC6**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Cynthia Grant**

Mailing Address 4327 43rd St NW

City Washington State DC Zip Code 20016-2413

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

Name of Employer GAO Occupation Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **320.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 28 / 2014**

**Transaction ID : VNHGDOV678**

Amount of Each Receipt this Period  
**50.00**

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

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

**200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Cynthia Grant**

Mailing Address 4327 43rd St NW

City Washington State DC Zip Code 20016-2413

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

Name of Employer GAO Occupation Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **370.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1ERH6**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**James R Grittner**

Mailing Address 2325 Hughitt Ave

City Superior State WI Zip Code 54880-4920

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNHWGD0T3J0**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kay Gruling**

Mailing Address 620 County Road O

City Wausau State WI Zip Code 54401-9091

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

Name of Employer Marshfield Clinic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 16 / 2014

**Transaction ID : VNHWGCWW746**

Amount of Each Receipt this Period  
**200.00**

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

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

**500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Robin Hafitz**

Mailing Address 21 E 22nd St  
Apt 12K

City New York State NY Zip Code 10010-5336

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

Name of Employer Self Occupation Market Research

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : VNHWCW4BX3**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert S Hage Jr.**

Mailing Address PO Box 220

City Hazelhurst State WI Zip Code 54531-0220

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

Name of Employer Minocqua Museum Occupation Historian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : VNHWCVYH82**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**William Hall**

Mailing Address 4803 Stettin Dr

City Wausau State WI Zip Code 54401-3822

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

Name of Employer Retired Occupation Retired Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD05R83**

Amount of Each Receipt this Period  
 100.00

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey Hallett**

Mailing Address 1009 Island Dr

City Delray Beach State FL Zip Code 33483-7119

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

Name of Employer None Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2014**

**Transaction ID : VNHWGCYVRW6**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Hallett**

Mailing Address 1009 Island Dr

City Delray Beach State FL Zip Code 33483-7119

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

Name of Employer None Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 30 / 2014**

**Transaction ID : VNHWGCY8R55**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Susan J Hansen**

Mailing Address 1123 E Lake Dr

City Shell Lake State WI Zip Code 54871-8747

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

Name of Employer Retired USPS Occupation Retired Postmaster

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **221.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 09 / 2014**

**Transaction ID : VNHWGCWEKA9**

Amount of Each Receipt this Period  
**21.00**

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

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

**221.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Susan J Hansen**

Mailing Address 1123 E Lake Dr

City State Zip Code  
Shell Lake WI 54871-8747

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

Name of Employer Occupation  
Retired USPS Retired Postmaster

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**271.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : VNHWGCZZGA2**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carol Hardin**

Mailing Address 1016 4th St

City State Zip Code  
Hudson WI 54016

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

Name of Employer Occupation  
City Of Hudson Librarian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**230.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNHWGD0TYS4**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Hardin**

Mailing Address 462 19th St

City State Zip Code  
Chetek WI 54728-9711

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

Name of Employer Occupation  
Retired Greenhouse grower

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 14 / 2014

**Transaction ID : VNHWGCZ7JA9**

Amount of Each Receipt this Period  
**100.00**

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

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

**175.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Fred Harris**

Mailing Address **PO Box 844**

City **Racine** State **WI** Zip Code **53401-0844**

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

Name of Employer **Key Lakes Inc.** Occupation **Marine Engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 05 / 2014**

**Transaction ID : VNHWCYFGQ5**

Amount of Each Receipt this Period  
**800.00**

**B.** Full Name (Last, First, Middle Initial)  
**Donald Hasenohrl**

Mailing Address **9516 Bluff Dr**

City **Pittsville** State **WI** Zip Code **54466-9763**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 24 / 2014**

**Transaction ID : VNHWGD097D5**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Edward Hebert**

Mailing Address **19483 79th Ave**

City **Chippewa Falls** State **WI** Zip Code **54729-8286**

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

Name of Employer **none** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 10 / 2014**

**Transaction ID : VNHWGCZ96F8**

Amount of Each Receipt this Period  
**500.00**

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

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

**1400.00**



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

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

FOR LINE NUMBER: PAGE 73 OF 198  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**John Hedges**

Mailing Address 421 W Melrose St  
Apt 17C

City Chicago State IL Zip Code 60657-3802

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

Name of Employer Self Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD0V4Q1**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**John Herlihy**

Mailing Address 80 Sylvan Ct

City Abington State MA Zip Code 02351-1632

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

Name of Employer Town of Braintree Occupation Operating Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 21 / 2014

**Transaction ID : VNHWGCXDRF4**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**John Herlihy**

Mailing Address 80 Sylvan Ct

City Abington State MA Zip Code 02351-1632

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

Name of Employer Town of Braintree Occupation Operating Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2014

**Transaction ID : VNHWGCZZGT7**

Amount of Each Receipt this Period  
25.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Molly Herr**

Mailing Address 5920 Wild Rose Ln

City Eau Claire State WI Zip Code 54701-8783

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

Name of Employer Mayo Clinic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 20 / 2014**

**Transaction ID : VNHWCX56V6**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Helen Hoar**

Mailing Address 1410 10th Ave W

City Ashland State WI Zip Code 54806

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 28 / 2014**

**Transaction ID : VNHWCXVXN0**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**David Hofstad**

Mailing Address 5711 Euclid St

City Cheverly State MD Zip Code 20785-2941

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

Name of Employer Self Employed Occupation Cpa

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 18 / 2014**

**Transaction ID : VNHWCWZWH7**

Amount of Each Receipt this Period  
**300.00**

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Hogan**

Mailing Address W11540 Bogus Rd

City State Zip Code  
Deerbrook WI 54424-9611

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

Name of Employer Occupation  
Terminologix LLC Management Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 30 / 2014

**Transaction ID : VNHWGCY8V93**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jim Holperin**

Mailing Address PO Box 1256

City State Zip Code  
Eagle River WI 54521-1256

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

Name of Employer Occupation  
Holperin Property Management Property Renovation & Rental

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : VNHWGCYQ19**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Holperin**

Mailing Address PO Box 1256

City State Zip Code  
Eagle River WI 54521-1256

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

Name of Employer Occupation  
Holperin Property Management Property Renovation & Rental

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGDQ581**

Amount of Each Receipt this Period  
50.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>Gretchen Hoover</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address PO Box 1087		<b>Transaction ID : VNHWCWW7E5</b>
City Rhineland	State WI	Zip Code 54501-1087
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) <b>Benjamin Horwitz</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1015 Sheridan Rd		<b>Transaction ID : VNHWGD12GF7</b>
City Glencoe	State IL	Zip Code 60022-1236
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer OFA	Occupation Field Organizer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>Richard R Howe</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 86 Woodfield Dr		<b>Transaction ID : VNHWCW99A8</b>
City Short Hills	State NJ	Zip Code 07078-1654
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Sullivan & Cromwell	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Richard R Howe**

Mailing Address 86 Woodfield Dr

City State Zip Code  
Short Hills NJ 07078-1654

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

Name of Employer Occupation  
Sullivan & Cromwell Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2014

**Transaction ID : VNHWCZTGW6**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Karl Humphrey**

Mailing Address 4313 Tulsa St

City State Zip Code  
Houston TX 77092-6705

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

Name of Employer Occupation  
Project Controls Engineer Project Controls Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 06 / 2014

**Transaction ID : VNHGWCWEFM9**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Claire Sue Ingersoll**

Mailing Address 130 Davis St

City State Zip Code  
Hamden CT 06517-3521

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

Name of Employer Occupation  
Not Employed Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 11 / 2014

**Transaction ID : VNHWCWYJB9**

Amount of Each Receipt this Period  
250.00

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

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

950.00

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

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

FOR LINE NUMBER: PAGE 78 OF 198  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**International Brotherhood of Electrical Workers Local 14**

Mailing Address **3460 Losey Blvd S**

City **La Crosse** State **WI** Zip Code **54601-7217**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 19 / 2014**

**Transaction ID : VNHWGCZTGJ7**

Amount of Each Receipt this Period  
**900.00**

**B.** Full Name (Last, First, Middle Initial)  
**Linda M James**

Mailing Address **493 Molimo Dr**

City **San Francisco** State **CA** Zip Code **94127-1655**

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

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1YY17**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Christopher L Jelen**

Mailing Address **8407 Castleberry Cir**

City **Schofield** State **WI** Zip Code **54476-5688**

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

Name of Employer Occupation  
**Northrop Grumman Engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 17 / 2014**

**Transaction ID : VNHWGCZJQR5**

Amount of Each Receipt this Period  
**200.00**

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

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

**1200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel F Johnson**

Mailing Address 3652 Tamarack Ln

City Eau Claire State WI Zip Code 54701-7264

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1625.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : VNHWCWYHR9**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel F Johnson**

Mailing Address 3652 Tamarack Ln

City Eau Claire State WI Zip Code 54701-7264

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1675.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2014

**Transaction ID : VNHWCXDR06**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel F Johnson**

Mailing Address 3652 Tamarack Ln

City Eau Claire State WI Zip Code 54701-7264

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1775.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : VNHWCZ96T5**

Amount of Each Receipt this Period  
100.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel F Johnson**

Mailing Address 3652 Tamarack Ln

City Eau Claire State WI Zip Code 54701-7264

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1825.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2014

**Transaction ID : VNHWGCZ99K6**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel F Johnson**

Mailing Address 3652 Tamarack Ln

City Eau Claire State WI Zip Code 54701-7264

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1875.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : VNHWGCZZDT0**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel F Johnson**

Mailing Address 3652 Tamarack Ln

City Eau Claire State WI Zip Code 54701-7264

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1925.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2014

**Transaction ID : VNHWGCZZGG0**

Amount of Each Receipt this Period  
50.00

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

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

150.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Eric Johnson**

Mailing Address 10500 9th Ln

City State Zip Code  
Hamburg WI 54411-8753

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**150.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 11 / 2014**

**Transaction ID : VNHWCWYJA1**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Eric Johnson**

Mailing Address 10500 9th Ln

City State Zip Code  
Hamburg WI 54411-8753

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 10 / 2014**

**Transaction ID : VNHWCZ9659**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Eric Johnson**

Mailing Address 10500 9th Ln

City State Zip Code  
Hamburg WI 54411-8753

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : VNHWGD1EQW0**

Amount of Each Receipt this Period  
**50.00**

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

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

**150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Johnson**

Mailing Address N11936 County Road L

City Tomahawk State WI Zip Code 54487-9485

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

Name of Employer Nicolet Tech College Occupation Instructor faculty

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **175.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2014**

**Transaction ID : VNHWGCVDBR0**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address N11936 County Road L

City Tomahawk State WI Zip Code 54487-9485

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

Name of Employer Nicolet Tech College Occupation Instructor faculty

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : VNHWGCZ8G86**

Amount of Each Receipt this Period  
**75.00**

**C.** Full Name (Last, First, Middle Initial)  
**Darleen E Jorgenson**

Mailing Address 115 N 9th St Apt 2

City River Falls State WI Zip Code 54022

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **231.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 19 / 2014**

**Transaction ID : VNHWGCXDQE3**

Amount of Each Receipt this Period  
**50.00**

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

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

**200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy S Kader**

Mailing Address 10301 Dunfries Rd

City Vienna	State VA	Zip Code 22181-4002
----------------	-------------	------------------------

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

Name of Employer Pal-Tech Inc	Occupation Director
----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : VNHWGCVYGZ1**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Steve Kagen M.D.**

Mailing Address 1712 S Mason St

City Appleton	State WI	Zip Code 54914-5535
------------------	-------------	------------------------

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

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : VNHWGCVYZ75**

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
**Steve Kagen M.D.**

Mailing Address 1712 S Mason St

City Appleton	State WI	Zip Code 54914-5535
------------------	-------------	------------------------

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

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 12 / 2014

**Transaction ID : VNHWGCZ98D5**

Amount of Each Receipt this Period  
1000.00

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Kay**

Mailing Address 2640 Benedict Canyon Dr

City State Zip Code  
Beverly Hills CA 90210-1023

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

Name of Employer Occupation  
Shriners Hospital for Children Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 14 / 2014

**Transaction ID : VNHWGCZ9AC3**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Philomena Kebec**

Mailing Address 117 8th St E

City State Zip Code  
Ashland WI 54806-3228

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

Name of Employer Occupation  
Bad River Tribe Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 31 / 2014

**Transaction ID : VNHWGCYVYXZ9**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Philomena Kebec**

Mailing Address 117 8th St E

City State Zip Code  
Ashland WI 54806-3228

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

Name of Employer Occupation  
Bad River Tribe Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 31 / 2014

**Transaction ID : VNHWGCY8WX4**

Amount of Each Receipt this Period  
50.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Kathryn Kienholz**

Mailing Address 2259 Antler Lake Ln

City Milltown State WI Zip Code 54858-2824

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

Name of Employer Polk County Occupation Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **675.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : VNHWGCVZ4Y6**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kathryn Kienholz**

Mailing Address 2259 Antler Lake Ln

City Milltown State WI Zip Code 54858-2824

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

Name of Employer Polk County Occupation Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **752.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : VNHWGCWEJR7**

Amount of Each Receipt this Period  
**77.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kathryn Kienholz**

Mailing Address 2259 Antler Lake Ln

City Milltown State WI Zip Code 54858-2824

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

Name of Employer Polk County Occupation Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **777.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2014

**Transaction ID : VNHWGCWEKN6**

Amount of Each Receipt this Period  
**25.00**

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

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

**127.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Kathryn Kienholz**

Mailing Address 2259 Antler Lake Ln

City Milltown State WI Zip Code 54858-2824

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

Name of Employer Polk County Occupation Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **802.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 02 / 2014

**Transaction ID : VNHWGCYR050**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kathryn Kienholz**

Mailing Address 2259 Antler Lake Ln

City Milltown State WI Zip Code 54858-2824

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

Name of Employer Polk County Occupation Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **827.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 10 / 2014

**Transaction ID : VNHWGCZ95D9**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kathryn Kienholz**

Mailing Address 2259 Antler Lake Ln

City Milltown State WI Zip Code 54858-2824

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

Name of Employer Polk County Occupation Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **852.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : VNHWGCZ949**

Amount of Each Receipt this Period  
**25.00**

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

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

**75.00**

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

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

FOR LINE NUMBER: PAGE 87 OF 198  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Kathryn Kienholz**

Mailing Address 2259 Antler Lake Ln

City Milltown State WI Zip Code 54858-2824

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

Name of Employer Polk County Occupation Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 952.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWGD0KAF6**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Kathryn Kienholz**

Mailing Address 2259 Antler Lake Ln

City Milltown State WI Zip Code 54858-2824

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

Name of Employer Polk County Occupation Supervisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1002.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1ERC7**

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
**Lori Kisling**

Mailing Address 913 Highlander Trl

City Hudson State WI Zip Code 54016-7987

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2014

**Transaction ID : VNHWGCX1X84**

Amount of Each Receipt this Period  
 100.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Ernest Korpela**

Mailing Address **PO Box 273**  
**24455 Town Rd B3**

City **Cornucopia** State **WI** Zip Code **54827-0273**

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

Name of Employer **Retired** Occupation **Retired School Admin**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 19 / 2014**

**Transaction ID : VNHWCX1Y11**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Maureen L Kovacs**

Mailing Address **427 Manzanita Ave**

City **Corte Madera** State **CA** Zip Code **94925-1517**

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

Name of Employer **Frank I Kovacs** Occupation **Art Dealer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 06 / 2014**

**Transaction ID : VNHGWCW3DQ0**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Fred Kramer**

Mailing Address **28270 McKenzie Rd**

City **Spooner** State **WI** Zip Code **54801-9001**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**260.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 25 / 2014**

**Transaction ID : VNHWGD0C1C8**

Amount of Each Receipt this Period  
**100.00**

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

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

**750.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce R Krawisz**

Mailing Address 1600 N Hills Dr

City Marshfield State WI Zip Code 54449-6000

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

Name of Employer Marshfield Clinic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : VNHWCXZ5E5**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Ellen Kwiatkowski**

Mailing Address 34045 S County Highway J

City Bayfield State WI Zip Code 54814-4683

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

Name of Employer Blue Vista Farm Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2014

**Transaction ID : VNHWCWD2R3**

Amount of Each Receipt this Period  
250.00

\* In-Kind: Venue Rental Fee for Fundraiser

**C.** Full Name (Last, First, Middle Initial)  
**Thorsten Landwehr**

Mailing Address 7635 10th st

City Chippewa Falls State WI Zip Code 54729

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

Name of Employer N/A Occupation Stay at home dad

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
135.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2014

**Transaction ID : VNHWCWEM11**

Amount of Each Receipt this Period  
50.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Thorsten Landwehr**

Mailing Address 7635 10th st

City Chippewa Falls State WI Zip Code 54729

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

Name of Employer N/A Occupation Stay at home dad

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 10 / 2014

**Transaction ID : VNHWGCZ95S4**

Amount of Each Receipt this Period  
 50.00

Amount of Each Receipt this Period  
 185.00

**B.** Full Name (Last, First, Middle Initial)  
**Thorsten Landwehr**

Mailing Address 7635 10th st

City Chippewa Falls State WI Zip Code 54729

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

Name of Employer N/A Occupation Stay at home dad

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : VNHWGCZZDQ7**

Amount of Each Receipt this Period  
 20.00

Amount of Each Receipt this Period  
 205.00

**C.** Full Name (Last, First, Middle Initial)  
**Thorsten Landwehr**

Mailing Address 7635 10th st

City Chippewa Falls State WI Zip Code 54729

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

Name of Employer N/A Occupation Stay at home dad

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1ESA2**

Amount of Each Receipt this Period  
 35.00

Amount of Each Receipt this Period  
 240.00

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

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

105.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Lang Sollinger**

Mailing Address 1206 Sherman Ave

City Madison State WI Zip Code 53703-1722

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

Name of Employer Retired Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 26 / 2014**

**Transaction ID : VNHWGCV8CQ6**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**John Langeland**

Mailing Address 4788 Silent Shores Dr

City Rhinelander State WI Zip Code 54501-8649

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 22 / 2014**

**Transaction ID : VNHWGCZZ4P0**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mark Laustrup**

Mailing Address 15244 W Circle Rd

City Hayward State WI Zip Code 54843-2583

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **204.50**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 17 / 2014**

**Transaction ID : VNHWGCWYQD6**

Amount of Each Receipt this Period  
**17.00**

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

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

**767.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Lastrup**

Mailing Address 15244 W Circle Rd

City: Hayward State: WI Zip Code: 54843-2583

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 221.50

Date of Receipt: 09 / 17 / 2014

**Transaction ID : VNHWGCZZCQ6**

Amount of Each Receipt this Period: 17.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark Lastrup**

Mailing Address 15244 W Circle Rd

City: Hayward State: WI Zip Code: 54843-2583

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 271.50

Date of Receipt: 09 / 30 / 2014

**Transaction ID : VNHWGD1ERF0**

Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
**Rose Marie Lefebvre**

Mailing Address 306 E Allman St

City: Medford State: WI Zip Code: 54451

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 200.00

Date of Receipt: 08 / 03 / 2014

**Transaction ID : VNHWGCVZ6R2**

Amount of Each Receipt this Period: 35.00

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

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

102.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Rose Marie Lefebvre**

Mailing Address 306 E Allman St

City Medford State WI Zip Code 54451

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 03 / 2014

**Transaction ID : VNHWGCRY1R3**

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
**Rose Marie Lefebvre**

Mailing Address 306 E Allman St

City Medford State WI Zip Code 54451

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
249.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : VNHWGD0V7V9**

Amount of Each Receipt this Period  
14.00

**C.** Full Name (Last, First, Middle Initial)  
**Barbara Lepinski**

Mailing Address 9300 Stettin Dr

City Wausau State WI Zip Code 54401-8862

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
125.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : VNHWGCVDAC5**

Amount of Each Receipt this Period  
75.00

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

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

124.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Lepinski**

Mailing Address 9300 Stettin Dr

City Wausau State WI Zip Code 54401-8862

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD05QM5**

Amount of Each Receipt this Period  
**175.00**

**B.** Full Name (Last, First, Middle Initial)  
**John Lepinski**

Mailing Address 222 E North St

City Appleton State WI Zip Code 54911-5454

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

Name of Employer Self Employed Occupation Real Estate Investing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : VNHWGD1EPT2**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Margaret Mary Lintula**

Mailing Address PO Box 136

City Drummond State WI Zip Code 54832-0136

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : VNHWGD0T5Z7**

Amount of Each Receipt this Period  
**100.00**

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

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

**775.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Dwight Logan**

Mailing Address 8580 Oak Park Cir

City State Zip Code  
Minocqua WI 54548-8751

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**365.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : VNHWCWEJD0**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Dwight Logan**

Mailing Address 8580 Oak Park Cir

City State Zip Code  
Minocqua WI 54548-8751

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**368.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 17 / 2014**

**Transaction ID : VNHGCWYQB1**

Amount of Each Receipt this Period  
**3.00**

**C.** Full Name (Last, First, Middle Initial)  
**Dwight Logan**

Mailing Address 8580 Oak Park Cir

City State Zip Code  
Minocqua WI 54548-8751

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**418.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : VNHGCZ9406**

Amount of Each Receipt this Period  
**50.00**

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

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

**103.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Dwight Logan**

Mailing Address 8580 Oak Park Cir

City State Zip Code  
Minocqua WI 54548-8751

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**618.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : VNHWCZBB8**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Dwight Logan**

Mailing Address 8580 Oak Park Cir

City State Zip Code  
Minocqua WI 54548-8751

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**621.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 17 / 2014**

**Transaction ID : VNHWCZCR4**

Amount of Each Receipt this Period  
**3.00**

**C.** Full Name (Last, First, Middle Initial)  
**Linda Look**

Mailing Address 9780 Leyland Dr  
Unit 4

City State Zip Code  
Myrtle Beach SC 29572-5558

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

Name of Employer Self Occupation Boardgame Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : VNHWCW90T5**

Amount of Each Receipt this Period  
**2600.00**

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

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

**2803.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Joyce Luedke</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 10696 W Otter Ln Hayward		<b>Transaction ID : VNHWCVKZD4</b>
City Hayward State WI Zip Code 54843-9107	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 280.00
Name of Employer none/retired Occupation none	Election Cycle-to-Date 280.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Joyce Luedke</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 10696 W Otter Ln Hayward		<b>Transaction ID : VNHWCZQ5K7</b>
City Hayward State WI Zip Code 54843-9107	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 380.00
Name of Employer none/retired Occupation none	Election Cycle-to-Date 380.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Stewart Macaulay</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 314 Shepard Ter		<b>Transaction ID : VNHWCZZCM2</b>
City Madison State WI Zip Code 53705-3618	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Univ. of Wisconsin-Madison Occupation Law Professor	Election Cycle-to-Date 300.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Stewart Macaulay**

Mailing Address 314 Shepard Ter

City Madison State WI Zip Code 53705-3618

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

Name of Employer Univ. of Wisconsin-Madison Occupation Law Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1KFR9**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jerry Madison**

Mailing Address 705 E Bridge St

City Wausau State WI Zip Code 54403-3618

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : VNHWGCV8BD4**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jerry Madison**

Mailing Address 705 E Bridge St

City Wausau State WI Zip Code 54403-3618

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 14 / 2014**

**Transaction ID : VNHWGCWPNA4**

Amount of Each Receipt this Period  
**100.00**

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Jerry Madison**

Mailing Address 705 E Bridge St

City Wausau State WI Zip Code 54403-3618

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : VNHWGD09896**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Helen H Madsen**

Mailing Address 5502 S Hill Dr

City Madison State WI Zip Code 53705-4639

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : VNHWGD0CSB2**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Al Manson**

Mailing Address 509 E 3rd St N

City Ladysmith State WI Zip Code 54848-1561

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNHWGD0VB05**

Amount of Each Receipt this Period  
**300.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Belinda Mathie**

Mailing Address 1219 W Cottage Pl

City Chicago State IL Zip Code 60607-2855

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

Name of Employer: Katten Muchin Rosenman LLP  
Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 30 / 2014**

**Transaction ID : VNHWCYWE4**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Belinda Mathie**

Mailing Address 1219 W Cottage Pl

City Chicago State IL Zip Code 60607-2855

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

Name of Employer: Katten Muchin Rosenman LLP  
Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWD1EQF8**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Myrna M. Mauch**

Mailing Address W15371 Isabella Ln

City Sheldon State WI Zip Code 54766-9116

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

Name of Employer: Retired  
Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 18 / 2014**

**Transaction ID : VNHWCWY4C8**

Amount of Each Receipt this Period  
**250.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Virginia Mazza**

Mailing Address 9897 Riveredge Dr

City Marshfield	State WI	Zip Code 54449-8722
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : VNHWGCXZ5C9**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Virginia Mazza**

Mailing Address 9897 Riveredge Dr

City Marshfield	State WI	Zip Code 54449-8722
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1ER69**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**John McFarland**

Mailing Address 696 Alder Lake Rd

City Manitowish Waters	State WI	Zip Code 54545-9064
---------------------------	-------------	------------------------

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

Name of Employer retired	Occupation retired farmer
-----------------------------	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2014

**Transaction ID : VNHWGCV8CE5**

Amount of Each Receipt this Period  
100.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**John McFarland**

Mailing Address 696 Alder Lake Rd

City Manitowish Waters State WI Zip Code 54545-9064

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

Name of Employer retired Occupation retired farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 26 / 2014**

**Transaction ID : VNHWGCY8MD1**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**John McFarland**

Mailing Address 696 Alder Lake Rd

City Manitowish Waters State WI Zip Code 54545-9064

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

Name of Employer retired Occupation retired farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2014**

**Transaction ID : VNHWGD0V5D3**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Patricia J. McKearn**

Mailing Address 27200 145th St

City New Auburn State WI Zip Code 54757-5292

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : VNHWGCY8QW4**

Amount of Each Receipt this Period  
**50.00**

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

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

**250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>Matthew R Meiners</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 10 Rayburn St		<b>Transaction ID : VNHWCW4DB4</b>
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 990.00
Name of Employer Self-Employed	Occupation Real Estate Development	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Matthew R Meiners</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 10 Rayburn St		<b>Transaction ID : VNHWCWEFG7</b>
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Self-Employed	Occupation Real Estate Development	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Linda Melski</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 1136 W Ives St		<b>Transaction ID : VNHWCYWF2</b>
City Marshfield	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer none	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Melski**

Mailing Address 1136 W Ives St

City Marshfield State WI Zip Code 54449-1211

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : VNHWCXZ631**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Linda Melski**

Mailing Address 1136 W Ives St

City Marshfield State WI Zip Code 54449-1211

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : VNHWCZZAN4**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Linda Melski**

Mailing Address 1136 W Ives St

City Marshfield State WI Zip Code 54449-1211

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

Name of Employer none Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EQQ1**

Amount of Each Receipt this Period  
100.00

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

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

850.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Mercier MD**

Mailing Address 1007 N Columbus Ave

City Marshfield	State WI	Zip Code 54449-1277
--------------------	-------------	------------------------

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

Name of Employer Marshfield Clinic	Occupation Physician
---------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : VNHWCYQQG8**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Mercier MD**

Mailing Address 1007 N Columbus Ave

City Marshfield	State WI	Zip Code 54449-1277
--------------------	-------------	------------------------

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

Name of Employer Marshfield Clinic	Occupation Physician
---------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : VNHWCZZ4V9**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Bernard Micke**

Mailing Address 26 N Prospect Ave

City Madison	State WI	Zip Code 53726-3974
-----------------	-------------	------------------------

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

Name of Employer Agrace Hospice	Occupation Physician
------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 13 / 2014

**Transaction ID : VNHWCWYM98**

Amount of Each Receipt this Period  
25.00

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

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

525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Bernard Micke**

Mailing Address 26 N Prospect Ave

City Madison State WI Zip Code 53726-3974

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

Name of Employer Agrace Hospice Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
260.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2014

**Transaction ID : VNHWGCDQD5**

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
**Bernard Micke**

Mailing Address 26 N Prospect Ave

City Madison State WI Zip Code 53726-3974

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

Name of Employer Agrace Hospice Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
310.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2014

**Transaction ID : VNHWGCRY2S1**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Bernard Micke**

Mailing Address 26 N Prospect Ave

City Madison State WI Zip Code 53726-3974

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

Name of Employer Agrace Hospice Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
320.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 12 / 2014

**Transaction ID : VNHGCGZ98E3**

Amount of Each Receipt this Period  
10.00

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

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

95.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Bernard Micke**

Mailing Address 26 N Prospect Ave

City Madison State WI Zip Code 53726-3974

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

Name of Employer Agrace Hospice Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
355.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : VNHWCZZAM7**

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Minahan**

Mailing Address 5390 S County Road K

City South Range State WI Zip Code 54874-8104

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

Name of Employer Retired Occupation Retired Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNHWGD0T5S1**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Lisa Mink M.D.**

Mailing Address 2168 16th St

City Rice Lake State WI Zip Code 54868-9590

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

Name of Employer Marshfield Clinic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : VNHWCVE268**

Amount of Each Receipt this Period  
50.00

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

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

135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Ed Moersfelder**

Mailing Address 1003 155th St

City State Zip Code  
Amery WI 54001-4813

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : VNHWGCZ9GX0**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Sara Muender**

Mailing Address 419 Cranberry Blvd

City State Zip Code  
Manitowsh Wtr WI 54545-9073

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

Name of Employer Occupation  
Self-Employed Artist/Gallery Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
570.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : VNHWGCZ9751**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Edward Mullaney**

Mailing Address 4654 W Shore Dr

City State Zip Code  
Crandon WI 54520-8732

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 25 / 2014

**Transaction ID : VNHWGCXDKF2**

Amount of Each Receipt this Period  
250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Mullaney**

Mailing Address 4654 W Shore Dr

City Crandon State WI Zip Code 54520-8732

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **260.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1EWF7**

Amount of Each Receipt this Period  
**10.00**

**B.** Full Name (Last, First, Middle Initial)  
**Suzanne Newcomer**

Mailing Address 42960 Kavanaugh Rd

City Cable State WI Zip Code 54821-4583

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 25 / 2014**

**Transaction ID : VNHWGD0CS89**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kathleen Noel**

Mailing Address 14705 Lata Vista Dr

City Elm Grove State WI Zip Code 53122-2121

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 28 / 2014**

**Transaction ID : VNHWGD0Q480**

Amount of Each Receipt this Period  
**100.00**

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

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

**360.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin OConnor**

Mailing Address 1510 Red Tail Dr

City: Verona State: WI Zip Code: 53593-7968

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

Name of Employer: Godfrey & Kahn SC Occupation: Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 09 / 25 / 2014

**Transaction ID : VNHWGD0V528**

Amount of Each Receipt this Period: 200.00

**B.** Full Name (Last, First, Middle Initial)  
**Katharine H Odell**

Mailing Address 1415 Vilas Ave

City: Madison State: WI Zip Code: 53711

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

Name of Employer: Marshfield Clinic Occupation: Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 10 / 2014

**Transaction ID : VNHWGCWEM03**

Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
**Katharine H Odell**

Mailing Address 1415 Vilas Ave

City: Madison State: WI Zip Code: 53711

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

Name of Employer: Marshfield Clinic Occupation: Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 09 / 10 / 2014

**Transaction ID : VNHWGCZ95R6**

Amount of Each Receipt this Period: 50.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Katharine H Odell**

Mailing Address 1415 Vilas Ave

City Madison State WI Zip Code 53711

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

Name of Employer Marshfield Clinic Occupation Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNHWGD1EQV2**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Olson**

Mailing Address 499 95th Ave

City Clayton State WI Zip Code 54004-3001

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

Name of Employer Information Requested Occupation Politician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **547.61**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 18 / 2014

**Transaction ID : VNHWGCWYCR9**

Amount of Each Receipt this Period  
**547.61**

**C.** Full Name (Last, First, Middle Initial)  
**Patricia J. Ortman**

Mailing Address 1800 County Highway A

City Ashland State WI Zip Code 54806-4918

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **585.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : VNHWGCZV9E8**

Amount of Each Receipt this Period  
**100.00**

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

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

**697.61**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Ouren**

Mailing Address 17892 County Road G

City Muscodia	State WI	Zip Code 53573-8826
------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : VNHWGCYVYQ3**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 17892 County Road G

City Muscodia	State WI	Zip Code 53573-8826
------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 29 / 2014

**Transaction ID : VNHWGCY8PT8**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1310 Maple Hill Rd

City Wausau	State WI	Zip Code 54403-2240
----------------	-------------	------------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.10

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : VNHWGCXAC46**

Amount of Each Receipt this Period  
50.00

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

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

150.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>Rita Pachal</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 23 / 2014
Mailing Address 1310 Maple Hill Rd		<b>Transaction ID : VNHWGD05RB6</b>
City Wausau	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	Election Cycle-to-Date 460.10
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>David Pagels</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 62771 Hegstrom Rd		<b>Transaction ID : VNHWGD1EQE0</b>
City Ashland	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Thrivent Financial	Occupation Financial Advisor	Election Cycle-to-Date 400.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Diane Williams Parker</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Mailing Address PO Box 1011		<b>Transaction ID : VNHWGCX6VF2</b>
City Thomasville	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Retail	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Diane Williams Parker**

Mailing Address PO Box 1011

City State Zip Code  
Thomasville GA 31799-1011

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self-Employed Retail

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNHWCZZ497**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Jeanne Patenaude**

Mailing Address N16411 Lakeshore Dr

City State Zip Code  
Butternut WI 54514-8813

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNHGCWVTQ8**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Jeanne Patenaude**

Mailing Address N16411 Lakeshore Dr

City State Zip Code  
Butternut WI 54514-8813

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : VNHWGD0J353**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Amy Pearl**

Mailing Address 555 S El Monte Ave

City Los Altos State CA Zip Code 94022-4057

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

Name of Employer Acorn Financial Planning Occupation Investment Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 07 / 2014

**Transaction ID : VNHWGCRY475**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**James T. Perkins**

Mailing Address 906 Michigan Ave Apt 3

City Evanston State IL Zip Code 60202-5420

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

Name of Employer Northshore University Healthsystem Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 17 / 2014

**Transaction ID : VNHGWCWYQR3**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jeff Peterson**

Mailing Address 750 Round Lake Rd

City Luck State WI Zip Code 54853-2017

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **680.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : VNHWGCVYS98**

Amount of Each Receipt this Period  
**100.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Peterson**

Mailing Address 750 Round Lake Rd

City Luck State WI Zip Code 54853-2017

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
780.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 30 / 2014

**Transaction ID : VNHWGCY8RJ8**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeff Peterson**

Mailing Address 750 Round Lake Rd

City Luck State WI Zip Code 54853-2017

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1280.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : VNHWGD0V4V3**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeff Peterson**

Mailing Address 750 Round Lake Rd

City Luck State WI Zip Code 54853-2017

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1380.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EQC4**

Amount of Each Receipt this Period  
100.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Jeanette Phelps**

Mailing Address **PO Box 1817**

City **Sebastopol** State **CA** Zip Code **95473-1817**

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

Name of Employer **Not Employed** Occupation **Not Employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 22 / 2014**

**Transaction ID : VNHWGD0V4X9**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Pufall L**

Mailing Address **1203 Main St E**

City **Ashland** State **WI** Zip Code **54806-2103**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD0J186**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Deborah Pyne**

Mailing Address **46760 Tri Lakes Rd**

City **Drummond** State **WI** Zip Code **54832**

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

Name of Employer **United Church of Christ** Occupation **Pastor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 20 / 2014**

**Transaction ID : VNHWGCX54Q1**

Amount of Each Receipt this Period  
**150.00**

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

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

**425.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Rebecca J. Rathke**

Mailing Address 803 5th Ave W

City Washburn State WI Zip Code 54891-9348

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

Name of Employer Teacher Occupation Washburn School

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2014**

**Transaction ID : VNHWCX60D2**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Charly Ray**

Mailing Address 32020 Friendly Valley Rd

City Washburn State WI Zip Code 54891

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

Name of Employer Northern Ecosystem Services Occupation Forestry

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2014**

**Transaction ID : VNHWCXDRK6**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Charly Ray**

Mailing Address 32020 Friendly Valley Rd

City Washburn State WI Zip Code 54891

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

Name of Employer Northern Ecosystem Services Occupation Forestry

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2014**

**Transaction ID : VNHWCZZGW3**

Amount of Each Receipt this Period  
**50.00**

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

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

**200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Pamela Rees**

Mailing Address 213 S High St

City State Zip Code  
Rising Sun IN 47040-1118

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

Name of Employer Occupation  
Rees Harps Inc. Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : VNHWGXCDS97**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary A. Rehwald**

Mailing Address 715 Ellis Ave

City State Zip Code  
Ashland WI 54806

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
175.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : VNHWGCVYRF3**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary A. Rehwald**

Mailing Address 715 Ellis Ave

City State Zip Code  
Ashland WI 54806

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 13 / 2014

**Transaction ID : VNHGWCWYK88**

Amount of Each Receipt this Period  
5.00

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

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

280.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Mary A. Rehwald**

Mailing Address 715 Ellis Ave

City Ashland State WI Zip Code 54806

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**205.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : VNHWGCY8QH9**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mary A. Rehwald**

Mailing Address 715 Ellis Ave

City Ashland State WI Zip Code 54806

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**210.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 13 / 2014**

**Transaction ID : VNHWGCZ98P7**

Amount of Each Receipt this Period  
**5.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mary A. Rehwald**

Mailing Address 715 Ellis Ave

City Ashland State WI Zip Code 54806

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**235.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : VNHWGD1ESQ4**

Amount of Each Receipt this Period  
**25.00**

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

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

**55.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Riedasch**

Mailing Address 505 Oak St W

City Frederic State WI Zip Code 54837-4639

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : VNHWGCZ9GQ3**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Louise S. Robbins**

Mailing Address 5406 Regent St

City Madison State WI Zip Code 53705-4629

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

Name of Employer Retired Occupation Retired (Former Professor)

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
510.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2014

**Transaction ID : VNHWGCXDRQ7**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Louise S. Robbins**

Mailing Address 5406 Regent St

City Madison State WI Zip Code 53705-4629

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

Name of Employer Retired Occupation Retired (Former Professor)

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
560.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD0V5N6**

Amount of Each Receipt this Period  
50.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Z. Roberts**

Mailing Address 845 Everest Dr

City State Zip Code  
Rothschild WI 54474-1020

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

Name of Employer Occupation  
Retired Retired Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3475.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : VNHWCYQQ85**

Amount of Each Receipt this Period  
975.00

**B.** Full Name (Last, First, Middle Initial)  
**Heyward G Robinson**

Mailing Address 1830 White Oak Dr

City State Zip Code  
Menlo Park CA 94025-6129

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

Name of Employer Occupation  
Sri International Scientist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : VNHGCWEFH5**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Rochelle Rothbaum**

Mailing Address 294 Richard Ct

City State Zip Code  
Pomona NY 10970-2305

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
384.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 21 / 2014

**Transaction ID : VNHGCXDRG2**

Amount of Each Receipt this Period  
30.00

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

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

1255.00

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

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

FOR LINE NUMBER: PAGE 123 OF 198  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Rochelle Rothbaum**

Mailing Address 294 Richard Ct

City Pomona State NY Zip Code 10970-2305

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **384.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 21 / 2014**

**Transaction ID : VNHWGCXDRH0**

Amount of Each Receipt this Period  
**10.00**

**B.** Full Name (Last, First, Middle Initial)  
**Rochelle Rothbaum**

Mailing Address 294 Richard Ct

City Pomona State NY Zip Code 10970-2305

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **394.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2014**

**Transaction ID : VNHWGCZGS9**

Amount of Each Receipt this Period  
**10.00**

**C.** Full Name (Last, First, Middle Initial)  
**Andy Rumer**

Mailing Address 405 Davis Ct  
Apt 2207

City San Francisco State CA Zip Code 94111-2448

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 06 / 2014**

**Transaction ID : VNHWGCYP564**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1020.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Rusch**

Mailing Address N8643 County Road C

City Rib Lake State WI Zip Code 54470-9427

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

Name of Employer Self-Employed Occupation Author

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 21 / 2014**

**Transaction ID : VNHWGCXDRN1**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Rusch**

Mailing Address N8643 County Road C

City Rib Lake State WI Zip Code 54470-9427

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

Name of Employer Self-Employed Occupation Author

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 21 / 2014**

**Transaction ID : VNHWGCZZGY8**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**George Rydberg**

Mailing Address 1013 6th Ave W

City Ashland State WI Zip Code 54806-3018

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **302.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 21 / 2014**

**Transaction ID : VNHWGCXDRM4**

Amount of Each Receipt this Period  
**17.00**

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

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

**117.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**George Rydberg**

Mailing Address 1013 6th Ave W

City Ashland State WI Zip Code 54806-3018

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **319.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2014

**Transaction ID : VNHWCZZGX0**

Amount of Each Receipt this Period  
**17.00**

**B.** Full Name (Last, First, Middle Initial)  
**George Rydberg**

Mailing Address 1013 6th Ave W

City Ashland State WI Zip Code 54806-3018

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **329.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWD0J136**

Amount of Each Receipt this Period  
**10.00**

**C.** Full Name (Last, First, Middle Initial)  
**Joy F Sabl**

Mailing Address 7008 Willard St

City Pittsburgh State PA Zip Code 15208-2841

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

Name of Employer Volunteer at Duquesne U. Occupation research (volunteer)

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : VNHWCZZC79**

Amount of Each Receipt this Period  
**100.00**

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

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

**127.00**

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 126 OF 198

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Joy F Sabl**  
 Mailing Address 7008 Willard St  
 City State Zip Code  
 Pittsburgh PA 15208-2841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Volunteer at Duquesne U. research (volunteer)  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 235.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : VNHWGD1EQ33**  
 Amount of Each Receipt this Period  
 135.00

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Sauter Sargent**  
 Mailing Address 24255 State Highway 13  
 City State Zip Code  
 Bayfield WI 54814-4919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Spirit Creek Farm Owner  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : VNHWGCY5441**  
 Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Deb Sawyer**  
 Mailing Address 549 N Cortez St  
 City State Zip Code  
 Salt Lake City UT 84103-2122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Volunteer Peace Activist Campaign to Abolish Nuclear Weapons  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2014  
**Transaction ID : VNHWGD0Q407**  
 Amount of Each Receipt this Period  
 1000.00

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

1335.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**George Schanback Jr**

Mailing Address 1850 60th Ave

City State Zip Code  
Osceola WI 54020-4702

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

Name of Employer Occupation  
Not employed Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : VNHWGD0K743**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Kevin F Schanning**

Mailing Address 12365 Scenic Dr

City State Zip Code  
Iron River WI 54847-4535

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

Name of Employer Occupation  
Northland College Professor of Sociology

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EQ17**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Arlene Schaupp**

Mailing Address 2621 Greer Rd

City State Zip Code  
Palo Alto CA 94303-3730

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

Name of Employer Occupation  
Self Employed Apartment Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : VNHWGCZVF34**

Amount of Each Receipt this Period  
400.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>Glenn H Schnadt</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 20215 Coneflower Ln		<b>Transaction ID : VNHWGCPST1</b>
City Richland Center	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Joyce Schneider</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 9903 County Road U		<b>Transaction ID : VNHWGD097N8</b>
City Wausau	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired Teacher	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Martin J Schreiber</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 2700 S Shore Dr Unit A		<b>Transaction ID : VNHWGCDRR5</b>
City Milwaukee	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Martin Schreiber & Associates, Inc.	Occupation Gov. Relations	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Deborah Schumaker**

Mailing Address 8353 Sweet Fern Ln

City Saint Germain State WI Zip Code 54558-8505

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

Name of Employer Cesa 9 Occupation Occupational Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **165.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 29 / 2014**

**Transaction ID : VNHWGCYVRQ6**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Deborah Schumaker**

Mailing Address 8353 Sweet Fern Ln

City Saint Germain State WI Zip Code 54558-8505

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

Name of Employer Cesa 9 Occupation Occupational Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **190.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 31 / 2014**

**Transaction ID : VNHWGCY8XJ0**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Deborah Schumaker**

Mailing Address 8353 Sweet Fern Ln

City Saint Germain State WI Zip Code 54558-8505

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

Name of Employer Cesa 9 Occupation Occupational Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **215.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 14 / 2014**

**Transaction ID : VNHWGCZ7GJ6**

Amount of Each Receipt this Period  
**25.00**

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

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

**75.00**

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

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

FOR LINE NUMBER: PAGE 130 OF 198  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Deborah Schumaker**

Mailing Address 8353 Sweet Fern Ln

City State Zip Code  
Saint Germain WI 54558-8505

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

Name of Employer Occupation  
Cesa 9 Occupational Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**235.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 27 / 2014**

**Transaction ID : VNHWGD0V7K6**

Amount of Each Receipt this Period  
**20.00**

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Schweisheimer**

Mailing Address PO Box 1848

City State Zip Code  
Woodruff WI 54568-1848

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**216.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 26 / 2014**

**Transaction ID : VNHWGD0KE23**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Pat Henry Sebranek**

Mailing Address 2640 South Rd

City State Zip Code  
Burlington WI 53105-9009

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

Name of Employer Occupation  
Self Educator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2014**

**Transaction ID : VNHWGCXADK7**

Amount of Each Receipt this Period  
**500.00**

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

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

**570.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Debra Shore**

Mailing Address 9232 Avers Ave

City Evanston State IL Zip Code 60203-1502

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

Name of Employer Metropolitan Water Reclamation Distric Occupation Commissioner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1650.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : VNHWGD0V536**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Katherine Siegler**

Mailing Address 700 Chapple Ave

City Ashland State WI Zip Code 54806-2932

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

Name of Employer WITC Occupation Dean

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNHWGD1EQ90**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Kajal Sitwala**

Mailing Address M304 Callaway Dr

City Marshfield State WI Zip Code 54449-8353

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

Name of Employer Marshfield Clinic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1460.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 02 / 2014

**Transaction ID : VNHWGCY4V33**

Amount of Each Receipt this Period  
1060.00

\* In-Kind: Catering for event

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

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

1310.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Roy Sjoberg</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2014	
Mailing Address 1108 Vine St		<b>Transaction ID : VNHWGCY8QZ8</b>	
City Hudson	State WI	Amount of Each Receipt this Period 50.00	
Zip Code 54016			
FEC ID number of contributing federal political committee. C			
Name of Employer Sjoberg & Tebelius, P.A.	Occupation attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 670.00		

Full Name (Last, First, Middle Initial) <b>B. Roy Sjoberg</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 1108 Vine St		<b>Transaction ID : VNHWGD1EQR9</b>	
City Hudson	State WI	Amount of Each Receipt this Period 100.00	
Zip Code 54016			
FEC ID number of contributing federal political committee. C			
Name of Employer Sjoberg & Tebelius, P.A.	Occupation attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 770.00		

Full Name (Last, First, Middle Initial) <b>C. John Slaby</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address PO Box 7		<b>Transaction ID : VNHWGD11N43</b>	
City Phillips	State WI	Amount of Each Receipt this Period 100.00	
Zip Code 54555-0007			
FEC ID number of contributing federal political committee. C			
Name of Employer Slaby, Deda, Marshall & Reinhard LLP	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. James Smit</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 15 / 2014
Mailing Address 111 Candee Ln		<b>Transaction ID : VNHWCWYPA0</b>
City Marquette	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Beacon House	Occupation Clerk	Election Cycle-to-Date 200.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. James Smit</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2014
Mailing Address 111 Candee Ln		<b>Transaction ID : VNHWCZZD49</b>
City Marquette	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Beacon House	Occupation Clerk	Election Cycle-to-Date 300.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Shirley Smith</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address 564 Flambeau Ave		<b>Transaction ID : VNHWGD1EQ41</b>
City Phillips	State WI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer none	Occupation Retired	Election Cycle-to-Date 250.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**John Snell**

Mailing Address 558 Echo Valley Rd

City State Zip Code  
Brooklyn WI 53521-9448

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

Name of Employer self Occupation  
self Registered Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : VNHWCWEKE1**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**John Snell**

Mailing Address 558 Echo Valley Rd

City State Zip Code  
Brooklyn WI 53521-9448

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

Name of Employer self Occupation  
self Registered Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EPW8**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Snow**

Mailing Address 3929 N Farwell Ave

City State Zip Code  
Shorewood WI 53211-2412

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

Name of Employer self Occupation  
Marquette University Professor of Philosophy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2014

**Transaction ID : VNHWGCV8CC9**

Amount of Each Receipt this Period  
600.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Lang Sollinger**

Mailing Address 1206 Sherman Ave

City Madison State WI Zip Code 53703-1722

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

Name of Employer None Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1EPV0**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Scott Somerville**

Mailing Address 15865 Guard St Apt 108

City Hayward State WI Zip Code 54843-5176

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

Name of Employer Hayward Area Memorial Hospital Occupation Nursing assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : VNHWGCVZ620**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Somerville**

Mailing Address 15865 Guard St Apt 108

City Hayward State WI Zip Code 54843-5176

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

Name of Employer Hayward Area Memorial Hospital Occupation Nursing assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2014

**Transaction ID : VNHWGCXDQ60**

Amount of Each Receipt this Period  
50.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Sorensen**

Mailing Address 32250 Oak Rd

City Washburn State WI Zip Code 54891-6849

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

Name of Employer O. Sorensen Occupation mental health tech

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1ET89**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert J Starshak M.D.**

Mailing Address 7720 N Merrie Ln

City Fox Point State WI Zip Code 53217-2962

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

Name of Employer Aurora Advanced Healthcare Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 21 / 2014**

**Transaction ID : VNHWGCX6VA3**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Anthony Stepanski**

Mailing Address 12 Kimball Cir

City Westfield State NJ Zip Code 07090-1809

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 15 / 2014**

**Transaction ID : VNHWGCZ8G52**

Amount of Each Receipt this Period  
**500.00**

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

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

**775.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Ruth Storer**

Mailing Address **PO Box 137**

City **Sanders** State **AZ** Zip Code **86512-0137**

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

Name of Employer **none** Occupation **retired teacher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 08 / 2014**

**Transaction ID : VNHWCWEHD7**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ruth Storer**

Mailing Address **PO Box 137**

City **Sanders** State **AZ** Zip Code **86512-0137**

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

Name of Employer **none** Occupation **retired teacher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 08 / 2014**

**Transaction ID : VNHWCZ9344**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Stram**

Mailing Address **1507 N Shawano Dr**

City **Marshfield** State **WI** Zip Code **54449-1351**

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

Name of Employer **Retired** Occupation **Ophthalmologist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1ERB9**

Amount of Each Receipt this Period  
**50.00**

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

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

**100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Bradley Sullivan**

Mailing Address 7811 E McMillan St

City Marshfield State WI Zip Code 54449-9095

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

Name of Employer Marshfield Clinic Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : VNHWCXZ5T0**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jason Terry**

Mailing Address 711 9th Ave W

City Ashland State WI Zip Code 54806-2811

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

Name of Employer Northland College Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : VNHWCZZER7**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Linda Thompson**

Mailing Address 2468 18 1/2 St

City Rice Lake State WI Zip Code 54868-9108

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
270.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD0V5X9**

Amount of Each Receipt this Period  
50.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Kathi Thonet**

Mailing Address 14 Upper Kingdom Road

City Pittstown State NJ Zip Code 08867

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

Name of Employer Thonet Associates Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : VNHWGCZHFE1**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Claudia Tibbetts**

Mailing Address 1403 SE 33rd St

City Cape Coral State FL Zip Code 33904-4275

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
175.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : VNHWGCZYQ51**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Claudia Tibbetts**

Mailing Address 1403 SE 33rd St

City Cape Coral State FL Zip Code 33904-4275

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 29 / 2014

**Transaction ID : VNHWGCY8P85**

Amount of Each Receipt this Period  
25.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Claudia Tibbetts</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 1403 SE 33rd St		<b>Transaction ID : VNHWGD1ESP7</b>	
City Cape Coral	State FL	Zip Code 33904-4275	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Not employed	Occupation Not employed		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph G. Tompkins</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 3787 Fort Charles Dr		<b>Transaction ID : VNHWCWEJX6</b>	
City Naples	State FL	Zip Code 34102-7934	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Joseph G. Tompkins</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 3787 Fort Charles Dr		<b>Transaction ID : VNHWGD0V4R9</b>	
City Naples	State FL	Zip Code 34102-7934	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Gerald Uglund</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 2450 River Bend Rd		<b>Transaction ID : VNHWGCY75B6</b>	
City Plover	State WI	Zip Code 54467-2728	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer N/A	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Bonnie Vick</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 12215 W Diane Dr		<b>Transaction ID : VNHWGCZ8G44</b>	
City Wauwatosa	State WI	Zip Code 53226-3356	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 200.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>C. Merry K. Vinette</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 222 Meadow Lark Ln		<b>Transaction ID : VNHWGCYBXV5</b>	
City Osceola	State WI	Zip Code 54020-4346	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer St. Croix Falls High School	Occupation Teacher		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Paul G Vogel</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 5400 S East View Park Apt 1		<b>Transaction ID : VNHWGCY8NY6</b>	
City Chicago State IL Zip Code 60615-5937	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C	Name of Employer Not Employed Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 150.00		

Full Name (Last, First, Middle Initial) <b>B. Paul G Vogel</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2014	
Mailing Address 5400 S East View Park Apt 1		<b>Transaction ID : VNHWGCZ9913</b>	
City Chicago State IL Zip Code 60615-5937	Amount of Each Receipt this Period _____ 35.00		
FEC ID number of contributing federal political committee. C	Name of Employer Not Employed Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 185.00		

Full Name (Last, First, Middle Initial) <b>C. Paul G Vogel</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 5400 S East View Park Apt 1		<b>Transaction ID : VNHWGCZZ9K8</b>	
City Chicago State IL Zip Code 60615-5937	Amount of Each Receipt this Period _____ 35.00		
FEC ID number of contributing federal political committee. C	Name of Employer Not Employed Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 220.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 120.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**William Volkman**

Mailing Address **N7349 State Highway 27**

City **Ladysmith** State **WI** Zip Code **54848-9616**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 21 / 2014**

**Transaction ID : VNHWCXDRS3**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**William Volkman**

Mailing Address **N7349 State Highway 27**

City **Ladysmith** State **WI** Zip Code **54848-9616**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : VNHWGD1EQM7**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Victoria A Vollrath**

Mailing Address **4129 Council Crst**

City **Madison** State **WI** Zip Code **53711-2928**

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

Name of Employer **retired** Occupation **physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 11 / 2014**

**Transaction ID : VNHWCWDXJ5**

Amount of Each Receipt this Period  
**250.00**

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

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

**850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**James Wahner**

Mailing Address **PO Box 16**

City **Mercer** State **WI** Zip Code **54547-0016**

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

Name of Employer **Wahner Professional Services** Occupation **Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 02 / 2014**

**Transaction ID : VNHWGCY58C3**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Brijetta Waller**

Mailing Address **6801 Gaylord Pkwy**

City **Frisco** State **TX** Zip Code **75034-8556**

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

Name of Employer **Hall Financial Group** Occupation **Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 25 / 2014**

**Transaction ID : VNHWGD0V510**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Andrew B. Warner**

Mailing Address **4751 N Woodburn St**

City **Whitefish Bay** State **WI** Zip Code **53211-1127**

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

Name of Employer **Plymouth Church UCC** Occupation **Senior Pastor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 20 / 2014**

**Transaction ID : VNHWGCZZGN9**

Amount of Each Receipt this Period  
**250.00**

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

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

**750.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Judith Weaver**

Mailing Address 1200 N Center Ave

City State Zip Code  
Merrill WI 54452-1250

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2014

**Transaction ID : VNHWGCXZ5X3**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 25A Crescent Dr # 415

City State Zip Code  
Pleasant Hill CA 94523-5508

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

Name of Employer Occupation  
The Ethical Edge, Inc. Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : VNHWGCWEFJ3**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Weber**

Mailing Address 25A Crescent Dr # 415

City State Zip Code  
Pleasant Hill CA 94523-5508

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

Name of Employer Occupation  
The Ethical Edge, Inc. Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : VNHWGD1EPX5**

Amount of Each Receipt this Period  
250.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Ralph Wehlitz**

Mailing Address 1403 E 8th St

City State Zip Code  
Merrill WI 54452-1538

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2014

**Transaction ID : VNHWCZTGE5**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Gwen Westlund**

Mailing Address PO Box 125

City State Zip Code  
Weyerhaeuser WI 54895-0125

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

Name of Employer Occupation  
CESA 10 Physical Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
602.71

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 03 / 2014

**Transaction ID : VNHWCVW7C6**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Gwen Westlund**

Mailing Address PO Box 125

City State Zip Code  
Weyerhaeuser WI 54895-0125

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

Name of Employer Occupation  
CESA 10 Physical Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
627.71

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 03 / 2014

**Transaction ID : VNHWCY6PE6**

Amount of Each Receipt this Period  
25.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Gwen Westlund**

Mailing Address **PO Box 125**

City **Weyerhaeuser** State **WI** Zip Code **54895-0125**

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

Name of Employer **CESA 10** Occupation **Physical Therapist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**637.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 13 / 2014**

**Transaction ID : VNHWGCZ98W4**

Amount of Each Receipt this Period  
**10.00**

**B.** Full Name (Last, First, Middle Initial)  
**Gwen Westlund**

Mailing Address **PO Box 125**

City **Weyerhaeuser** State **WI** Zip Code **54895-0125**

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

Name of Employer **CESA 10** Occupation **Physical Therapist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**737.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 25 / 2014**

**Transaction ID : VNHWGD0CS13**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Cathy J. Wolf**

Mailing Address **1120 8th Ave**

City **Hillsdale** State **WI** Zip Code **54733-9524**

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

Name of Employer **Cecchetti Council of America** Occupation **Author**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 23 / 2014**

**Transaction ID : VNHWGD0V550**

Amount of Each Receipt this Period  
**100.00**

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

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

**210.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Polly Wolner**

Mailing Address 1560 E Orchard Beach Ln

City State Zip Code  
Rice Lake WI 54868-3029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 18 / 2014

**Transaction ID : VNHWCWY6C2**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Shelby Woodard**

Mailing Address 122 Butternut Ct

City State Zip Code  
River Falls WI 54022-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : VNHWD0CS47**

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
**Rick Wylie**

Mailing Address 219 Starrwood

City State Zip Code  
Hudson WI 54016-7174

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 21 / 2014

**Transaction ID : VNHWCX65Z3**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

900.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 198
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Harriet Zaretsky**

Mailing Address 801 Latimer Rd

City Santa Monica State CA Zip Code 90402-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : VNHWCW44Y5**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Dixie Zietlow**

Mailing Address 5231 Balsam Ln S

City Eagle River State WI Zip Code 54521-9709

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD0Q4Y4**

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1050.00

96390.74

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 198
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A. BadgerPAC**

Full Name (Last, First, Middle Initial)  
**BadgerPAC**

Mailing Address **PO Box 70980**

City **Washington** State **DC** Zip Code **20024-0980**

FEC ID number of contributing federal political committee. **C C00382242**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 18 / 2014**

**Transaction ID : VNHWGCZZ5Y6**

Amount of Each Receipt this Period  
**2500.00**

\* Earmarked Contribution: See Below

**B. New Democrat Coalition Political Action Committee AKA NDC PAC**

Full Name (Last, First, Middle Initial)  
**New Democrat Coalition Political Action Committee AKA NDC PAC**

Mailing Address **700 13th St NW Ste 600**

City **Washington** State **DC** Zip Code **20005-5998**

FEC ID number of contributing federal political committee. **C C00409730**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 22 / 2014**

**Transaction ID : VNHWGCZZ5Y6E**

Amount of Each Receipt this Period  
**2500.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C. Barren Co Democratic Party**

Full Name (Last, First, Middle Initial)  
**Barren Co Democratic Party**

Mailing Address **726 E Birch Ave**

City **Barron** State **WI** Zip Code **54812-9140**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 29 / 2014**

**Transaction ID : VNHWGCVATK0**

Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2700.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 198
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Burnett County Democrats**

Mailing Address PO Box 545

City Siren State WI Zip Code 54872-0545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : VNHWGCV0XS4**

Amount of Each Receipt this Period  
 400.00

**B.** Full Name (Last, First, Middle Initial)  
**Burnett County Democrats**

Mailing Address PO Box 545

City Siren State WI Zip Code 54872-0545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2014

**Transaction ID : VNHWGD04SB0**

Amount of Each Receipt this Period  
 250.00

Comprised of Federally Permissible Funds

**C.** Full Name (Last, First, Middle Initial)  
**Chippewa Co Democratic Party**

Mailing Address 620 Superior St

City Chippewa Falls State WI Zip Code 54729-2212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : VNHWGCVATW1**

Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

850.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 198
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Democracy for America**

Mailing Address **PO Box 1717**

City **Burlington** State **VT** Zip Code **05402-1717**

FEC ID number of contributing federal political committee. **C C00370007**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 17 / 2014**

**Transaction ID : VNHWGCZJQA6**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**Democratic Party of Oneida County**

Mailing Address **5590 Lassig Rd**

City **Rhineland** State **WI** Zip Code **54501-9223**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**50.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : VNHWGCVKZE2**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Forest County Democratic Party**

Mailing Address **PO Box 332**

City **Crandon** State **WI** Zip Code **54520-0332**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**105.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 10 / 2014**

**Transaction ID : VNHWGCWD2C9**

Amount of Each Receipt this Period  
**50.00**

Comprised of Federally Permissible Funds

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2700.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 OF 198  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**LEAGUE OF CONSERVATION VOTERS ACTION FUND**

Mailing Address 1920 L St NW  
Ste 800

City Washington State DC Zip Code 20036-5045

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2640.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1YXR6**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**LEAGUE OF CONSERVATION VOTERS ACTION FUND**

Mailing Address 1920 L St NW  
Ste 800

City Washington State DC Zip Code 20036-5045

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2640.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1ZAP9**

Amount of Each Receipt this Period  
140.00

\* In-Kind: Endorsement Fee

**C.** Full Name (Last, First, Middle Initial)  
**Lincoln County Democratic Party**

Mailing Address 908 N Cleveland St

City Merrill State WI Zip Code 54452-1133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 09 / 10 / 2014

**Transaction ID : VNHWGCYYW59**

Amount of Each Receipt this Period  
300.00

Comprised of Federally Permissible Funds

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2940.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 198
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A. Full Name (Last, First, Middle Initial)**  
**Marathon County Democratic Party**

Mailing Address PO Box 1515

City	State	Zip Code
Wausau	WI	54402-1515

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : VNHWCW4204**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 400.00

Comprised of Federally Permissible Funds

**B. Full Name (Last, First, Middle Initial)**  
**Polk Co Democratic Party**

Mailing Address 2860 Highway 35

City	State	Zip Code
Frederic	WI	54837

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2014

**Transaction ID : VNHWCV0Y41**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 150.00

Comprised of Federally Permissible Funds

**C. Full Name (Last, First, Middle Initial)**  
**Progressive Action Political Action Committee**

Mailing Address PO Box 70980

City	State	Zip Code
Washington	DC	20024-0980

FEC ID number of contributing federal political committee. **C** C00513176

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : VNHWCVYHM7**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_ 1550.00

\_\_\_\_\_

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 198
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Rusk Co Democratic Party**

Mailing Address 509 E 3rd St N

City Ladysmith State WI Zip Code 54848-1561

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : VNHWGCVAT42**

Amount of Each Receipt this Period  
**200.00**

Comprised of Federally Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**Vilas County Democratic Party**

Mailing Address PO Box 1013

City Woodruff State WI Zip Code 54568-1013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2014

**Transaction ID : VNHWGCVASP1**

Amount of Each Receipt this Period  
**400.00**

Comprised of Federally Permissible Funds

**C.** Full Name (Last, First, Middle Initial)  
**Washburn County Democratic Party**

Mailing Address 300 Park West Ave

City Spooner State WI Zip Code 54801-7220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : VNHWGCW41Z6**

Amount of Each Receipt this Period  
**50.00**

Comprised of Federally Permissible Funds

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**650.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 198
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A.** Full Name (Last, First, Middle Initial)  
**Women's Action for New Directions Inc (WAND)**

Mailing Address 691 Massachusetts Ave

City State Zip Code  
Arlington MA 02476-4905

FEC ID number of contributing federal political committee. **C** C00170316

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : VNHWGD1KEN5**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Wood County Democratic Party**

Mailing Address 811 Brentwood Dr

City State Zip Code  
Port Edwards WI 54469-1172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2014

**Transaction ID : VNHWGCWM1D0**

Amount of Each Receipt this Period  
600.00

Comprised of Federally Permissible Funds

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1600.00

12990.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Hafeezah Abdullah</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014		
Mailing Address PO Box 1013			Amount of Each Disbursement this Period 1434.65		
City Ashland	State WI	Zip Code 54806-0970	Transaction ID : VNGX89T1PV6		
Purpose of Disbursement Payroll		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Hafeezah Abdullah</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014		
Mailing Address PO Box 1013			Amount of Each Disbursement this Period 432.90		
City Ashland	State WI	Zip Code 54806-0970	Transaction ID : VNGX89T1PW4		
Purpose of Disbursement Reimbursement - Mileage		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Hafeezah Abdullah</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014		
Mailing Address PO Box 1013			Amount of Each Disbursement this Period 1434.65		
City Ashland	State WI	Zip Code 54806-0970	Transaction ID : VNGX89T1PX2		
Purpose of Disbursement Payroll		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3302.20
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 158 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Hafeezah Abdullah</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address PO Box 1013		Amount of Each Disbursement this Period 1434.65 <b>Transaction ID : VNGX89T1PY0</b>
City Ashland	State WI	
Zip Code 54806-0970	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Hafeezah Abdullah</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address PO Box 1013		Amount of Each Disbursement this Period 501.99 <b>Transaction ID : VNGX89T1M90</b>
City Ashland	State WI	
Zip Code 54806-0970	Purpose of Disbursement Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Hafeezah Abdullah</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address PO Box 1013		Amount of Each Disbursement this Period 1434.65 <b>Transaction ID : VNGX89T1M83</b>
City Ashland	State WI	
Zip Code 54806-0970	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3371.29
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 159 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Hafeezah Abdullah</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2014
Mailing Address PO Box 1013		Amount of Each Disbursement this Period 66.40
City Ashland State WI Zip Code 54806-0970	Purpose of Disbursement Reimbursement - Office Supplies Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNGX89T1MF8</b>

Full Name (Last, First, Middle Initial) <b>B. Amazon.com, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 1200 12th Ave S Ste 1200		Amount of Each Disbursement this Period 46.98
City Seattle State WA Zip Code 98144-2734	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNGX89T09E2</b>

Full Name (Last, First, Middle Initial) <b>c. Amazon.com, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address 1200 12th Ave S Ste 1200		Amount of Each Disbursement this Period 248.50
City Seattle State WA Zip Code 98144-2734	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNGX89T09F9</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	361.88
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 160 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Amazon.com, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1200 12th Ave S Ste 1200		Amount of Each Disbursement this Period 227.98 <b>Transaction ID : VNGX89T09G7</b>
City Seattle State WA Zip Code 98144-2734	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Amazon.com, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 1200 12th Ave S Ste 1200		Amount of Each Disbursement this Period 113.32 <b>Transaction ID : VNGX89T09H5</b>
City Seattle State WA Zip Code 98144-2734	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 47.86 <b>Transaction ID : VNGX89SZ539</b>
City Carol Stream State IL Zip Code 60197-6416	Purpose of Disbursement Mobile Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	389.16
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 161 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 53.13 <b>Transaction ID : VNGX89SPH83</b>
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 47.86 <b>Transaction ID : VNGX89SZ547</b>
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 47.86 <b>Transaction ID : VNGX89T1XH3</b>
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	148.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 162 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 53.13
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	<b>Transaction ID : VNGX89T1XJ1</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 26.76
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	<b>Transaction ID : VNGX89T1XM7</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 42.54
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	<b>Transaction ID : VNGX89T1XQ0</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	122.43
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 42.54
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	<b>Transaction ID : VNGX89T1XN4</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 47.81
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	<b>Transaction ID : VNGX89T1XP2</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 53.13
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	<b>Transaction ID : VNGX89T1XR8</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	143.48
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 198			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 42.54
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	<b>Transaction ID : VNGX89T1XS6</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 47.81
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Mobile Phones	<b>Transaction ID : VNGX89T1XT4</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kirk Bangstad</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 9684 Island City Point Rd		Amount of Each Disbursement this Period 431.83
City Minocqua	State WI	
Zip Code 54548-8762	Purpose of Disbursement Event Venue Fee	<b>Transaction ID : VNHWGD112H6I</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	522.18
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Bankcard Merchant Fees</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address N1866 Greenwood Rd		Amount of Each Disbursement this Period 122.29
City Greenville State WI Zip Code 54942-9093	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	001 Category/Type	Transaction ID : VNGX89SW721
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bankcard Merchant Fees</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address N1866 Greenwood Rd		Amount of Each Disbursement this Period 560.60
City Greenville State WI Zip Code 54942-9093	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	001 Category/Type	Transaction ID : VNGX89T09J3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Thomas L Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 601 3rd Ave W		Amount of Each Disbursement this Period 925.20
City Ashland State WI Zip Code 54806-3137	Purpose of Disbursement Payroll	
Candidate Name	001 Category/Type	Transaction ID : VNGX89T1WG4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1608.09
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 198			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A. Budget Signs & Specialties**

Full Name (Last, First, Middle Initial)  
Mailing Address 2225 Industrial Dr

City Monona State WI Zip Code 53713-4806

Purpose of Disbursement Posters & Lawn Signs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 05 / 2014

Amount of Each Disbursement this Period: 5723.38

Transaction ID : VNGX89T09Q3

Category/Type: 006

**B. CFO Compliance LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Park Row Ste 5

City Providence State RI Zip Code 02903-1235

Purpose of Disbursement Consultant - Compliance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 1201.96

Transaction ID : VNGX89T0A04

Category/Type: 001

**c. CFO Compliance LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Park Row Ste 5

City Providence State RI Zip Code 02903-1235

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 31 / 2014

Amount of Each Disbursement this Period: 218.75

Transaction ID : VNGX89SZ555

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 7144.09

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. CFO Compliance LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 1 Park Row Ste 5		Amount of Each Disbursement this Period 2406.37
City Providence	State RI	
Zip Code 02903-1235	Purpose of Disbursement Consultant - Compliance	<b>Transaction ID : VNGX89T0A20</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charter Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 12405 Powerscourt Dr		Amount of Each Disbursement this Period 382.11
City Saint Louis	State MO	
Zip Code 63131-3673	Purpose of Disbursement Internet/Cable	<b>Transaction ID : VNGX89T0A37</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charter Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 12405 Powerscourt Dr		Amount of Each Disbursement this Period 125.46
City Saint Louis	State MO	
Zip Code 63131-3673	Purpose of Disbursement Internet/Cable	<b>Transaction ID : VNGX89T0A45</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2913.94
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 198			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

**A. Charter Communications**

Full Name (Last, First, Middle Initial)  
Mailing Address 12405 Powerscourt Dr

City Saint Louis State MO Zip Code 63131-3673

Purpose of Disbursement Internet/Cable

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 02 / 2014

Amount of Each Disbursement this Period: 176.70

Transaction ID : VNGX89T0A53

Category/Type: 001

**B. Charter Communications**

Full Name (Last, First, Middle Initial)  
Mailing Address 12405 Powerscourt Dr

City Saint Louis State MO Zip Code 63131-3673

Purpose of Disbursement Internet/Cable

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 02 / 2014

Amount of Each Disbursement this Period: 447.85

Transaction ID : VNGX89T0A79

Category/Type: 001

**c. Dino Corvino**

Full Name (Last, First, Middle Initial)  
Mailing Address 5016 Chadwick St

City Schofield State WI Zip Code 54476-3057

Purpose of Disbursement Office Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 380.00

Transaction ID : VNGX89T0AE4

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 1004.55

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 169 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Dino Corvino</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2014
Mailing Address 5016 Chadwick St		Amount of Each Disbursement this Period 380.00
City Schofield	State WI	
Zip Code 54476-3057	Purpose of Disbursement Office Rent	<b>Transaction ID : VNGX89T0AF2</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sheila Coyle</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 360 W Washington Ave Unit 1007		Amount of Each Disbursement this Period 78.15
City Madison	State WI	
Zip Code 53703-2766	Purpose of Disbursement Food	<b>Transaction ID : VNHWGCYB6E3I</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 108.72
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement On-line Advertising	<b>Transaction ID : VNGX89T1PD8</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	566.87
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 170 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Joe Florio</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 31 / 2014</b>
Mailing Address <b>33246 N Lake Shore Dr</b>		Amount of Each Disbursement this Period <b>1145.63</b> <b>Transaction ID : VNGX89T1QA5</b>
City <b>Grayslake</b> State <b>IL</b> Zip Code <b>60030-1723</b>	Purpose of Disbursement <b>Payroll</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joe Florio</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 04 / 2014</b>
Mailing Address <b>33246 N Lake Shore Dr</b>		Amount of Each Disbursement this Period <b>687.60</b> <b>Transaction ID : VNGX89T1QB3</b>
City <b>Grayslake</b> State <b>IL</b> Zip Code <b>60030-1723</b>	Purpose of Disbursement <b>Reimbursement - Mileage</b> Category/Type <b>002</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Joe Florio</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 15 / 2014</b>
Mailing Address <b>33246 N Lake Shore Dr</b>		Amount of Each Disbursement this Period <b>1145.63</b> <b>Transaction ID : VNGX89T1QD8</b>
City <b>Grayslake</b> State <b>IL</b> Zip Code <b>60030-1723</b>	Purpose of Disbursement <b>Payroll</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2978.86</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Joe Florio</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 33246 N Lake Shore Dr		Amount of Each Disbursement this Period 1145.63
City Grayslake	State IL	
Zip Code 60030-1723	Purpose of Disbursement Payroll	<b>Transaction ID : VNGX89T1QC1</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Joe Florio</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address 33246 N Lake Shore Dr		Amount of Each Disbursement this Period 1145.63
City Grayslake	State IL	
Zip Code 60030-1723	Purpose of Disbursement Payroll	<b>Transaction ID : VNGX89T1MR9</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Joe Florio</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2014
Mailing Address 33246 N Lake Shore Dr		Amount of Each Disbursement this Period 371.70
City Grayslake	State IL	
Zip Code 60030-1723	Purpose of Disbursement Mileage	<b>Transaction ID : VNGX89T1MS7</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2662.96
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 198			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Melanie Franklin</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address N7930 Hi Line Ave		Amount of Each Disbursement this Period 44.15
City Spencer	State WI	
Zip Code 54479-9048	Purpose of Disbursement food for thorp event	Transaction ID : VNHWGCX3SF7I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GBA Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1901 L St NW Ste 702		Amount of Each Disbursement this Period 23400.00
City Washington	State DC	
Zip Code 20036-3511	Purpose of Disbursement Consultant - Polling	Transaction ID : VNGX89T1PH9
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shrija Ghosh</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 4485 Lochurst Dr		Amount of Each Disbursement this Period 873.74
City Pfafftown	State NC	
Zip Code 27040-9495	Purpose of Disbursement Payroll	Transaction ID : VNGX89T1VY2
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24317.89
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 173 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Shrija Ghosh</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 4485 Lochurst Dr		Amount of Each Disbursement this Period 873.75 <b>Transaction ID : VNGX89T1VZ0</b>
City Pfafftown	State NC	
Zip Code 27040-9495	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Shrija Ghosh</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address 4485 Lochurst Dr		Amount of Each Disbursement this Period 873.74 <b>Transaction ID : VNGX89T1W08</b>
City Pfafftown	State NC	
Zip Code 27040-9495	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Google</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 59.66 <b>Transaction ID : VNGX89T1PQ5</b>
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement On-Line Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1807.15
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 74.99
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement On-Line Advertising	<b>Transaction ID : VNGX89T1M25</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Holiday Station Store #3515</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 110 Ellis Ave S		Amount of Each Disbursement this Period 300.00
City Ashland	State WI	
Zip Code 54806-1640	Purpose of Disbursement Gasoline	<b>Transaction ID : VNGX89T1Q39</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Holiday Station Store #3515</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 110 Ellis Ave S		Amount of Each Disbursement this Period 12.74
City Ashland	State WI	
Zip Code 54806-1640	Purpose of Disbursement Meals & Beverages	<b>Transaction ID : VNGX89T1Q22</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	387.73
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 175 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Holiday Station Store #3515</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 110 Ellis Ave S		Amount of Each Disbursement this Period 38.90
City Ashland State WI Zip Code 54806-1640	Purpose of Disbursement Gasoline Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNGX89T1MJ2</b>

Full Name (Last, First, Middle Initial) <b>B. Holiday Station Store #3515</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 110 Ellis Ave S		Amount of Each Disbursement this Period 400.00
City Ashland State WI Zip Code 54806-1640	Purpose of Disbursement Gasoline Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNGX89T1MN5</b>

Full Name (Last, First, Middle Initial) <b>c. Ellen Kwiatkowski</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 34045 S County Highway J		Amount of Each Disbursement this Period 250.00
City Bayfield State WI Zip Code 54814-4683	Purpose of Disbursement Venue Rental Fee for Fundraiser Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNHWCWD2R3I</b>  * In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	688.90
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 176 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. LEAGUE OF CONSERVATION VOTERS ACTION FUND</b>		Date of Disbursement MM / DD / YYYY <b>09 / 30 / 2014</b>
Mailing Address 1920 L St NW Ste 800		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : VNHWGD1ZAP9I</b>
City Washington State DC Zip Code 20036-5045	Purpose of Disbursement Endorsement Fee	
Candidate Name <b>LEAGUE OF CONSERVATION VOTERS ACTION FUND</b>		* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Christina Marshalek</b>		Date of Disbursement MM / DD / YYYY <b>08 / 15 / 2014</b>
Mailing Address 204 1/2 Main St W Apt 325		Amount of Each Disbursement this Period 295.88 <b>Transaction ID : VNGX89T0AA3</b>
City Ashland State WI Zip Code 54806-1653	Purpose of Disbursement Payroll	
Candidate Name		Category/Type <b>001</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Christina Marshalek</b>		Date of Disbursement MM / DD / YYYY <b>08 / 28 / 2014</b>
Mailing Address 204 1/2 Main St W Apt 325		Amount of Each Disbursement this Period 819.12 <b>Transaction ID : VNGX89T0AB1</b>
City Ashland State WI Zip Code 54806-1653	Purpose of Disbursement Payroll	
Candidate Name		Category/Type <b>001</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1255.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Christina Marshalek</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 204 1/2 Main St W Apt 325		Amount of Each Disbursement this Period 819.12
City Ashland	State WI Zip Code 54806-1653	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : VNGX89T0AC9
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MDP Properties, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 704 Woodard Ave		Amount of Each Disbursement this Period 1050.00
City Tomah	State WI Zip Code 54660-2030	
Purpose of Disbursement Office Rent	Category/Type 001	Transaction ID : VNGX89T1RB5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. MDP Properties, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 704 Woodard Ave		Amount of Each Disbursement this Period 1050.00
City Tomah	State WI Zip Code 54660-2030	
Purpose of Disbursement Office Rent	Category/Type 001	Transaction ID : VNGX89T1RC3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2919.12
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 198			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Evan W Medina</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2014
Mailing Address 3709 Ross Ave Apt 2		Amount of Each Disbursement this Period 1145.63 <b>Transaction ID : VNGX89T0AJ6</b>
City Schofield	State WI	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Evan W Medina</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 3709 Ross Ave Apt 2		Amount of Each Disbursement this Period 1145.63 <b>Transaction ID : VNGX89T0AH8</b>
City Schofield	State WI	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Evan W Medina</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 3709 Ross Ave Apt 2		Amount of Each Disbursement this Period 1145.63 <b>Transaction ID : VNGX89T0AK4</b>
City Schofield	State WI	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3436.89
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 179 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Evan W Medina</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 3709 Ross Ave Apt 2		Amount of Each Disbursement this Period 1145.63 <b>Transaction ID : VNGX89T0AM2</b>
City Schofield	State WI	
Zip Code 54476-1902	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Evan W Medina</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 3709 Ross Ave Apt 2		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : VNGX89T1JK6</b>
City Schofield	State WI	
Zip Code 54476-1902	Purpose of Disbursement Reimbursement - Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2700.00 <b>Transaction ID : VNGX89T1RS6</b>
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Database	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4245.63
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 180 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 2962.11 <b>Transaction ID : VNGX89T1V96</b>
City Riverside	State RI	
Zip Code 02915-1507	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 71.60 <b>Transaction ID : VNGX89T1VA4</b>
City Riverside	State RI	
Zip Code 02915-1507	Purpose of Disbursement Payroll Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 3525.27 <b>Transaction ID : VNGX89T1VB2</b>
City Riverside	State RI	
Zip Code 02915-1507	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6558.98
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 181 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 183.55
City Riverside	State RI	
Zip Code 02915-1507	Purpose of Disbursement Payroll Processing Fee	<b>Transaction ID : VNGX89T1VC0</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 85.40
City Riverside	State RI	
Zip Code 02915-1507	Purpose of Disbursement Payroll Processing Fee	<b>Transaction ID : VNGX89T1VD8</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 4072.87
City Riverside	State RI	
Zip Code 02915-1507	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : VNGX89T1VG1</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4341.82
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 182 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 4345.88
City Riverside	State RI	
Zip Code 02915-1507	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : VNGX89T1VH9</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 501 Wampanoag Trl		Amount of Each Disbursement this Period 140.45
City Riverside	State RI	
Zip Code 02915-1507	Purpose of Disbursement Payroll Processing Fee	<b>Transaction ID : VNGX89T1VJ7</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Petty Cash</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 501 11th Ave E PO Box 1013		Amount of Each Disbursement this Period 23.00
City Ashland	State WI	
Zip Code 54806-2028	Purpose of Disbursement Petty Cash	<b>Transaction ID : VNGX89T09T6</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4509.33
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Petty Cash</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 501 11th Ave E PO Box 1013		Amount of Each Disbursement this Period 100.00
City Ashland State WI Zip Code 54806-2028	Purpose of Disbursement Petty Cash	
Candidate Name	Category/Type	Transaction ID : VNGX89T09W2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Petty Cash</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 501 11th Ave E PO Box 1013		Amount of Each Disbursement this Period 84.50
City Ashland State WI Zip Code 54806-2028	Purpose of Disbursement Petty Cash	
Candidate Name	Category/Type 002	Transaction ID : VNGX89T1NQ4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Pineda</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 278 Wheat Rd		Amount of Each Disbursement this Period 925.20
City Vineland State NJ Zip Code 08360-9626	Purpose of Disbursement Payroll	
Candidate Name	Category/Type 001	Transaction ID : VNGX89T1QP0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1109.70
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 198		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Kyle Pineda</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 278 Wheat Rd		Amount of Each Disbursement this Period 925.21 <b>Transaction ID : VNGX89T1QQ7</b>
City Vineland	State NJ	
Zip Code 08360-9626	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Brian Pospeck</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VNGX89SW762</b>
City Ashland	State WI	
Zip Code 54806	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Brian Pospeck</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 12.48 <b>Transaction ID : VNGX89SZ4X1</b>
City Ashland	State WI	
Zip Code 54806	Purpose of Disbursement Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1437.69
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 198			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Walgreen's #10758</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 110 Lake Shore Dr W		Amount of Each Disbursement this Period 23.04
City Ashland State WI Zip Code 54806-1645	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	Transaction ID : VNGX89T7540
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>B. Brian Pospeck</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 23.04
City Ashland State WI Zip Code 54806	Purpose of Disbursement Reimbursement - Office Supplies	
Candidate Name	Category/Type	Transaction ID : VNGX89T09M9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	001	
State: District:		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) <b>c. Walgreen's #10758</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 110 Lake Shore Dr W		Amount of Each Disbursement this Period 23.04
City Ashland State WI Zip Code 54806-1645	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	Transaction ID : VNGX89T7557
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		[MEMO ITEM] *

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23.04
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 186 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Brian Pospeck</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VNGX89SW770</b>
City Ashland State WI Zip Code 54806	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brian Pospeck</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : VNGX89T75P9</b>
City Ashland State WI Zip Code 54806	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Brian Pospeck</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VNGX89T09N7</b>
City Ashland State WI Zip Code 54806	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Brian Pospeck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 44.97
City Ashland State WI Zip Code 54806	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNGX89T09Y8
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Walgreen's #10758</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 110 Lake Shore Dr W		Amount of Each Disbursement this Period 44.97
City Ashland State WI Zip Code 54806-1645	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNGX89T7516 [MEMO ITEM] *
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Brian Pospeck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 500.00
City Ashland State WI Zip Code 54806	Purpose of Disbursement Stipend 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNGX89T09P5
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	544.97
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 198			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Brian Pospeck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 609 13th Ave E		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VNGX89T1K58</b>
City Ashland	State WI Zip Code 54806	
Purpose of Disbursement Stipend	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kaeleen Ringberg</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 314 14th Ave W		Amount of Each Disbursement this Period 1736.29 <b>Transaction ID : VNGX89T1QG2</b>
City Ashland	State WI Zip Code 54806-1234	
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kaeleen Ringberg</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 314 14th Ave W		Amount of Each Disbursement this Period 1736.29 <b>Transaction ID : VNGX89T1QE6</b>
City Ashland	State WI Zip Code 54806-1234	
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3972.58
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 189 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Kaeleen Ringberg</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 314 14th Ave W		Amount of Each Disbursement this Period 1736.29 <b>Transaction ID : VNGX89T1QF4</b>
City Ashland State WI Zip Code 54806-1234	Purpose of Disbursement Payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kaeleen Ringberg</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address 314 14th Ave W		Amount of Each Disbursement this Period 1736.29 <b>Transaction ID : VNGX89T1MV3</b>
City Ashland State WI Zip Code 54806-1234	Purpose of Disbursement Payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kara Schmidt</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2014
Mailing Address 1123 N 21st St		Amount of Each Disbursement this Period 157.79 <b>Transaction ID : VNGX89T1QJ8</b>
City Superior State WI Zip Code 54880	Purpose of Disbursement Reimbursement - Mileage Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3630.37
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 190 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Kajal Sitwala</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address M304 Callaway Dr		Amount of Each Disbursement this Period 1060.00
City Marshfield	State WI	
Zip Code 54449-8353	Purpose of Disbursement Catering for event	Transaction ID : VNHWGCY4V33I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sun Printing</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 1800 Grand Ave		Amount of Each Disbursement this Period 1635.72
City Wausau	State WI	
Zip Code 54403-6869	Purpose of Disbursement Direct Mail Printing	Transaction ID : VNGX89T1W65
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sun Printing</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address 1800 Grand Ave		Amount of Each Disbursement this Period 32.18
City Wausau	State WI	
Zip Code 54403-6869	Purpose of Disbursement Printing	Transaction ID : VNGX89T1W73
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2727.90
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 191 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Sun Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1800 Grand Ave		Amount of Each Disbursement this Period 563.37 <b>Transaction ID : VNGX89T1W81</b>
City Wausau State WI Zip Code 54403-6869	Purpose of Disbursement Printing - Campaign Materials Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 615 Main St W		Amount of Each Disbursement this Period 17.95 <b>Transaction ID : VNGX89T1X32</b>
City Ashland State WI Zip Code 54806-1300	Purpose of Disbursement Postage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 615 Main St W		Amount of Each Disbursement this Period 343.00 <b>Transaction ID : VNGX89T1X90</b>
City Ashland State WI Zip Code 54806-1300	Purpose of Disbursement Postage - Fundraising Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	924.32
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 192 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 615 Main St W		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : VNGX89T1XA8</b>
City Ashland State WI Zip Code 54806-1300	Purpose of Disbursement Postage - Fundraising Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2465 Iron Point Rd		Amount of Each Disbursement this Period 53.13 <b>Transaction ID : VNGX89T1XC3</b>
City Folsom State CA Zip Code 95630-8754	Purpose of Disbursement Mobile Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 2465 Iron Point Rd		Amount of Each Disbursement this Period 47.86 <b>Transaction ID : VNGX89T1XD1</b>
City Folsom State CA Zip Code 95630-8754	Purpose of Disbursement Mobile Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	590.99
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 198			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 2465 Iron Point Rd		Amount of Each Disbursement this Period 435.66 <b>Transaction ID : VNGX89T1XE9</b>
City Folsom State CA Zip Code 95630-8754	Purpose of Disbursement Mobile Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 2465 Iron Point Rd		Amount of Each Disbursement this Period 53.13 <b>Transaction ID : VNGX89T1XF7</b>
City Folsom State CA Zip Code 95630-8754	Purpose of Disbursement Mobile Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Meghan Vondriska</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 924 County Rd N		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VNGX89T1RE9</b>
City Hudson State WI Zip Code 54016-8303	Purpose of Disbursement Stipend Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	988.79
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 198			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Walgreen's #10758</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 110 Lake Shore Dr W		Amount of Each Disbursement this Period 21.79
City Ashland State WI Zip Code 54806-1645	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name		Transaction ID : VNGX89T1XY6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2500 Lake Shore Dr E		Amount of Each Disbursement this Period 78.66
City Ashland State WI Zip Code 54806-2421	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name		Transaction ID : VNGX89T1XW0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 2500 Lake Shore Dr E		Amount of Each Disbursement this Period 36.79
City Ashland State WI Zip Code 54806-2421	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name		Transaction ID : VNGX89T1XX8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	137.24
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 195 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Tarah Walsh</b>			Date of Disbursement MM / DD / YYYY 08 / 15 / 2014	
Mailing Address W177S8055 Brennan Dr			Amount of Each Disbursement this Period 663.28	
City Muskego	State WI	Zip Code 53150-8023	Transaction ID : VNGX89T1WA7	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Tarah Walsh</b>			Date of Disbursement MM / DD / YYYY 08 / 28 / 2014	
Mailing Address W177S8055 Brennan Dr			Amount of Each Disbursement this Period 899.48	
City Muskego	State WI	Zip Code 53150-8023	Transaction ID : VNGX89T1WB5	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Tarah Walsh</b>			Date of Disbursement MM / DD / YYYY 09 / 15 / 2014	
Mailing Address W177S8055 Brennan Dr			Amount of Each Disbursement this Period 899.49	
City Muskego	State WI	Zip Code 53150-8023	Transaction ID : VNGX89T1WC3	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2462.25
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Webco of Wausau</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 1405 W Thomas St		Amount of Each Disbursement this Period 329.69
City Wausau State WI Zip Code 54401-5719	Purpose of Disbursement Campaign T-Shirts	
Candidate Name	Category/Type 006	Transaction ID : VNGX89T1Y01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kelly Westlund</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 501 11th Ave E		Amount of Each Disbursement this Period 395.00
City Ashland State WI Zip Code 54806-2028	Purpose of Disbursement Reimbursement - Travel	
Candidate Name	Category/Type 002	Transaction ID : VNGX89T1QK6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kelly Westlund</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 501 11th Ave E		Amount of Each Disbursement this Period 1269.16
City Ashland State WI Zip Code 54806-2028	Purpose of Disbursement Mileage	
Candidate Name	Category/Type 002	Transaction ID : VNGX89T1QM4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1993.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 198			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Michael Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 5711 8th Ave		Amount of Each Disbursement this Period 367.77
City Kenosha State WI Zip Code 53140-4002	Purpose of Disbursement Reimbursement - Mileage 002 Category/Type	
Candidate Name		Transaction ID : VNGX89T1RH3
Office Sought: House Senate President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Michael Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 5711 8th Ave		Amount of Each Disbursement this Period 1820.68
City Kenosha State WI Zip Code 53140-4002	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name		Transaction ID : VNGX89T1RJ1
Office Sought: House Senate President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Michael Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 5711 8th Ave		Amount of Each Disbursement this Period 1820.68
City Kenosha State WI Zip Code 53140-4002	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name		Transaction ID : VNGX89T1RK9
Office Sought: House Senate President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4009.13
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 198 OF 198	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Kelly Westlund for Wisconsin**

Full Name (Last, First, Middle Initial) <b>A. Michael Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 5711 8th Ave		Amount of Each Disbursement this Period 1820.68 <b>Transaction ID : VNGX89T1RM7</b>
City Kenosha State WI Zip Code 53140-4002	Purpose of Disbursement Payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Michael Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 5711 8th Ave		Amount of Each Disbursement this Period 128.11 <b>Transaction ID : VNGX89T1RN4</b>
City Kenosha State WI Zip Code 53140-4002	Purpose of Disbursement Mileage Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1948.79
<b>TOTAL</b> This Period (last page this line number only).....	109460.88