2017 · 07 · 19 · 03 · 001649%5

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2017 JUL 19 PM 12: 33

Office Use Only

NAME OF COMMITTEE (in full)	TYPE OR	PRINT ▼	Example: over the line	f typing, type nes.	12FE4N	15		
B A Y C A R E P	H Y S I C	I A N S I	PAC	 	<u> </u>	_1_1_		
					<u> </u>			
ADDRESS (number and stree	1) 1 6 4	N B R	D A D W A Y		<u> </u>			
Check if different				<u></u>				
than previously reported. (ACC)	GRE	E N B A Y	<u> </u>		WI	5 4 3 0	3 - 2	7 2 8
2. FEC IDENTIFICATION	I NUMBER ▼	, cr	ΓΥ 🛦		STATE A	ZIF	CODÉ A	<u> </u>
C 0 0 4 0 7	7 0 0		S THIS REPORT	NEW (N) OF		AMENDED (A)		
4. TYPE OF REPORT (Choose One)	(b) Mo	nthiy Feb	20 (M2)	May 20 (M	5) A	ug 20 (M8)	Nov (Mon-l	20 (M11) Election
(a) Quarterly Reports:	Du	e On: Mai	20 (M3)	Jun 20 (M6	s) 🗓 s	ep 20 (M9)	☐ Dec	20 (M12) Election
April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report	ort (Q2)	12-Day PRE-Election Report for the:	Conve	Jul 20 (M7) / (12P) htion (12C)	Gener Specia	al (12S)	5a;1 F3	31 (YE) off (12R)
July 31 Mid-Ye Report (Non-el Year Only) (M	ection (a)	30-Day POST-Election Report for the:	Genera	ıl (30G)	Runof	f (30R)	Spec	cial (30S)
Termination Re (TER)	port	Election	on on	, (66)	V-0444	"1	the tate of	
5. Covering Period	01 0	1 2017	thro	ugh 06	/ B v B	2017		
I certify that I have examine Type or Print Name of Trea	י מזים	and to the best of S AUGUSTIA	•	and belief it is	true, correct	and complete.		
Signature of Treasurer		L Aug	grt .		Date C)7 07) / \$750-70 2 2	2017
NOTE: Submission of false, e	erroneous, or in	complete information	n may subject th	e person signing	this Report to	the penalties	of 2 U.S.C.	. §437g.
Office Use	1					1	FORM 3	3X

2017 - 07 - 19 - 03 - 00164986

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BAYCARE PHYSICIANS PAC

Report Covering the Period:







	•	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2017		54,960.63
	(b) Cash on Hand at Beginning of Reporting Period	54,960.63	
	(c) Total Receipts (from Line 19)	6,683.81	6,683.81
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	61,644.44	61,644.44
 7.	Total Disbursements (from Line 31)	2,500.00	2.500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	59,144.44	59,144.44
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		



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

For further information contact:

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

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

FE6AN026

DETAILED SUMMARY PAGE

of Receipts Page 3 FEC Form 3X (Rev. 06/2004) Write or Type Committee Name BAYCARE PHYSICIANS PAC 01 2017 Report Covering the Period: From: To: COLUMN A **COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)......▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).......▶ 20. Total Federal Receipts 6,683.81 6,683.81 (subtract Line 18(c) from Line 19) ▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B
21.	Operating Expenditures:	Total This Period	Calendar Year-to-Date
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share		
	(7)		
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures		
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶		
22.	Transfers to Affiliated/Other Party		
23.	Contributions to		
	Federal Candidates/Committees and Other Political Committees	2,500.00	2,500.00
24	Independent Expenditures		
	(use Schedule E)		
25.	Coordinated Party Expenditures		
	(2 U.S.C. §441a(d)) (use Schedule F)		
26.	Loan Repayments Made		
27. 28	Loans MadeRefunds of Contributions To:		
20.	(a) Individuals/Persons Other		
	Than Political Committees		
	(b) Political Party Committees		
	(c) Other Political Committees		
	(such as PACs)		
	,		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		
29.	Other Disbursements		
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share		
	(i) i oddiai oriaio		
	(ii) "Levin" Share		
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		B
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2,500.00	2,500.00
30	Total Federal Disbursements		
32.	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	2,500.00	2 500 00
		2,000.00	2,500.00
		·	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A COLUMN B III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)) 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

S

9/	CHEDIII E A (EEC Form 2V)		<u> </u>	T	ND !!	NE N	LIMPET	, I-	2405	1 -)F 1
SCHEDULE A (FEC Form 3X) Use separate			Use separate schedule(s)	ule(s) (check only one)				AGE	1	OF 1	
Ιſ	EMIZED RECEIPTS		for each category of the Detailed Summary Page	l `-	7 11:	·-] 11b	<u>11</u>	c [12	_
			<u> </u>		13		14	15		16	17
	ny information copied from such Reports and S for commercial purposes, other than using the										
\setminus	NAME OF COMMITTEE (In Full)										
Z	BAYCARE PHYSICIANS PAC										
Α.	Full Name (Last, First, Middle Initial) BRADA, STEPHEN, A				Date	of R	eceipt		•		
	Mailing Address 700 TERRAVIEW DR					6 22 2017					
	GREEN BAY	State WI	Zip Code 54301		Amo	unt o	f Each	Recei	ot this	Period	
	FEC ID number of contributing federal political committee.		07700			2.00			(1) <u></u> 1		~
	Name of Employer BAYCARE CLINIC, LLP	Occupation		1 -	5/22/ _. 1/21/		\$866.2 \$352.0				
	Receipt For:	J	Year-to-Date ▼		3/22/		\$976.5				
	Primary General		<mark>ۻڹڎۻۺڎڰڰڛۻڛۺۻڛڞڛڞۺڰۺڞۺڞڞ</mark>		2/22/ 1/20/		\$352.0 \$1,129				
	Other (specify) ▼	4,028.0	() <u> -() </u>] '	1,20,	•••	ψ1,1 <u>2</u> 0	J			_
_	Full Name (Last, First, Middle Initial)						-				
В.					Date	e of F	Receipt				
	Mailing Address				Amount of Each Receipt this Period						~ ~)
	City	State Zip Code									d
	FEC ID number of contributing federal political committee.	C 004	07700						_		
	Name of Employer	Occupation	1								
	Receipt For:	Aggregate	Year-to-Date ▼	\dashv							
	Primary General	7		,							
	Other (specify) ▼		<u> </u>								
C.	Full Name (Last, First, Middle Initial)				Date	e of F	Receipt				
	Mailing Address			м 6	THE STREET	/ E3	/ آھ	20	~~~~ 17	~ ~	
	City	Zip Code	_	Amo	ount o	f Each	Recei	pt this	s Perio	<u></u> 1 d	
	FEC ID number of contributing federal political committee.	07700									
	Name of Employer Occupation										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	Lineanser Co.							
	SUBTOTAL of Receipts This Page: (optional)			<u> </u>	4,	028.	00		<u>~~</u>		

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

4,028.00

SCHEDULE B (FEC Form 3X)

	Use separate schedule(s)	FOR LINE N	
TEMIZED DISBURSEMENTS	for each category of the	(check only	
	Detailed Summary Page	21b 27	22
Any information poping from such Decade and Or	iente may not be sold		┸╌┸╌╌┸╌┸
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
BAYCARE PHYSICIANS PAC			
Full Name (Last, First, Middle Initial)			
A. Mike Gallagher for Wisconsin			Date of Disbursement
Mailing Address .			03 200 2017
PO BOX 1027	WI 54305		
•	State Zip Code		
Green Bay Purpose of Disbursement			
Contribution	I 8	011	Amount of Each Disbursement this Period
Candidate Name	———		
Mike Gallagher		Category/ Type	2,500.00
Office Sought:			
Senate	Primary General		
President President	Other (specify) ▼		
State: WI District: 8	<u> </u>		<u> </u>
Full Name (Last, First, Middle Initial)		ļ	Date of Disbursement
•.		ļ	
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
. urpose or Dispulsement		Amount of Each Disbursement this Period	
Candidate Name	Cotocci	Amount of Each Disbursement this 1 endu	
		Category/ Type	
Office Sought: House Disburser	, ,		
Senate	Primary General		
President District: 4	Other (specify) ▼		
State: WI District: 1			
Full Name (Last, First, Middle Initial) C.			Date of Disbursement
			M M / D D / V V V V
Mailing Address			
City	State Zip Code		
Purpose of Disbursement	F		
Candidate Name		<u></u>	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: House Disburser	nent For:	.,,,,,	
Senate	Primary General		1
President	Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			2,500.00
TOTAL This Period (last page this line number only)		······	2,500.00

STAILING WELL

105/14/2017 105/2051/2017 \$007.50º FIRST-CLASS MAIL neopost

ZIP 54303 041L11250947

RECEIVED
FEC MAIL CENTER
2017 JUL 19 PM 12: 33:

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

AL & CONFIDENTIAL i_i

728

Federal Election Co ENVELOPE REPLACEMENT PAGE FO The FEC added this page to the end of this fil	OR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C) - 7/14/17
USPS Priority Mail	Postmarked , ⁱ i
	· :
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registrat	Date of Receipt ion Office
Received from Senate Public Records Office	Date of Receipt ce
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
DDEDARED	7/19/17
(3/2015)	DATE PREPARED